Care Services Improvement Partnership CSIP



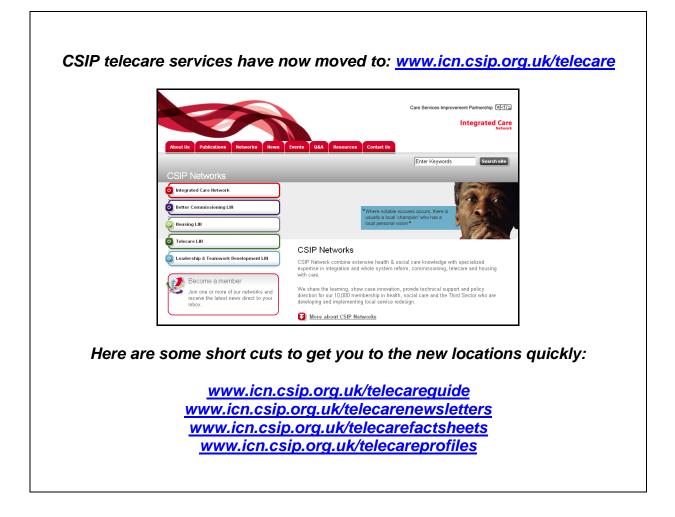
# **CSIP** Telecare eNewsletter

# August 2007

Welcome to the August 2007 CSIP telecare eNewsletter. The Care Services Improvement Partnership (CSIP) is responsible for providing general implementation support to organisations building their telecare and telehealth programmes.

If you are an organisation implementing telecare and have an interesting local telecare story for inclusion in a future newsletter then e-mail Mike Clark (newsletter editor) at <u>telecare@csip.org.uk</u>

If you or a colleague would like to receive future copies of the newsletter then all you need to do is register at <a href="http://www.icn.csip.org.uk/index.cfm?pid=12">http://www.icn.csip.org.uk/index.cfm?pid=12</a>



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*Item 1* provides details of the CSCI figures from local authorities. This will be of particular interest to organisations commissioning and providing telecare and telehealth services.

*Item 2* includes references to proposed CSIP telecare events in early 2008 which will focus on the outcomes from two years of the PT Grant.

Item 3 provides examples of progress around the country with accessible web links.

*Item 4* provides an update on references to dementia and telecare following the recent announcement of the Dementia Strategy. This will be of particular interest to organisations commissioning and providing telecare and telehealth services.

Item 5 provides information about the important work carried out at CUHTec.

*Item 6* lists other relevant news items including an update on self care from the Department of Health.

*Item 7* lists some of the upcoming events that CSIP has organised or is presenting at.

The **Appendix** provides three detailed tables from the CSCI returns

The September 2007 newsletter will include:

- Updates from the NHS PASA framework suppliers
- Further information about proposed CSIP events for early 2008
- Update on telehealth references

# 1 Preventative Technology Grant – CSCI figures for 2007 now available

(Prepared by Mike Clark for CSIP based on CSCI data available in August 2007. Thanks to Alan Rosenbach, Nick Miller and colleagues at CSCI)

### a) Summary

When the CSCI 'new user' outturn for local authorities alone (53,761) is added to local authorities in partnership with another agency (29,981), then the potential 60,000\* additional users benefiting from Building Telecare in England in the first year of the PT Grant would be achieved (83,742).

The figure is higher when other agencies (alone) are also included. A further 65,999 users would give a grand total of 149,741 for 2006/7. The grand total would, of course, be based on all funding and not solely the PT Grant (CSCI guidance notes). The first two categories are more likely to reflect PT Grant expenditure.

Further information is provided on the projections for 2007/8 and the split of expenditure between infrastructure and equipment/services.

### b) Background

Building Telecare in England and LAC (2006)5 identified that CSCI would be involved in the collection of performance information in respect of telecare for the period 2006-2008 when the Preventative Grant would be available to 150 social care authorities and their partners.

Building Telecare in England (July 2005)

http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH\_4115303 LAC(2006)5 http://www.dh.gov.uk/en/Publicationsandstatistics/Lettersandcirculars/Localauthoritysocialservicesletters/DH\_413

<u>1935</u>

The grant is not ring-fenced and does not include conditions. Grant allocations for both 2006/7 and 2007/8 were announced in LAC (2006)5 in March 2007.

A simple indicator was devised to link with the PT Grant investment of £80m and the overall aim of 160,000 new users benefiting over the two years.

Building Telecare in England, Department of Health, 2005 - Additional users benefiting from telecare

...The grant should be used to increase the numbers of people who benefit from telecare, by at least 160,000 older people nationally....

....Through the grant, the Department expects councils to invest in telecare to help support individuals in the community. This aims to help an additional 160,000 older people to live at home with safety and security and reduce the number of avoidable admissions to residential/nursing care and hospital....

Local authorities are encouraged to work with partners to make the best use of all available funding (not solely the grant). Partners would typically include PCTs, Housing Associations/RSLs and third sector organisations.

Obviously, care should be taken to avoid diverting funding, however, local authorities should take account of telecare currently provided through Supporting People and various housing schemes (eg extra care) to support people in their own homes.

The first collection of local data was carried out by CSCI in April 2006. The aim was to:

- 1) Identify baseline figures at March/April 2006
- 2) Identify projections of additional users and equipment/infrastructure expenditure for 2006/7 and 2007/8
- 3) Obtain a summary of the proposed scope of the telecare service

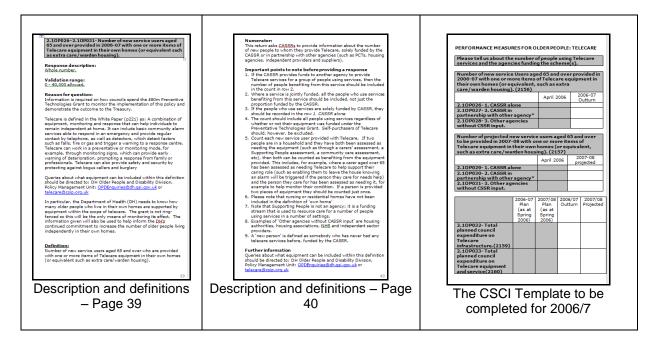
Summaries of 2006 CSCI information are available at *www.icn.csip.org.uk/telecarefactsheets*.

A profile has been developed for each of the 150 social care authorities based on the 2006 information. These profiles, which will be updated shortly are available at *www.icn.csip.org.uk/telecareprofiles*.

# c) Collection arrangements for 2007

The CSCI data collection arrangements for 2007 are in the Performance Assessment Handbook.

Main Web link – Then go to Annex 4 – Self Assessment Survey Guidance: <u>http://www.csci.org.uk/professional/councils/performance\_assessment/performance\_assessment\_handboo.aspx</u> See Page 28 and Pages 39-41.



The final figures for 2007 have now been made available by CSCI.

Current totals for all 150 social care authorities have been added to the CSCI template below for:

- 2006/7 planned and outturn for new users
- 2007/8 Planned as at April 2006 and projected as at April 2007 for new users
- 2006/7 and 2007/8 Outturn for 2006/7 on expenditure split into infrastructure and equipment/services together with plan/projection figures

### PERFORMANCE MEASURES FOR OLDER PEOPLE: TELECARE

Please tell us about the number of people using Telecare services and the agencies funding the scheme(s).						
Number of new service Users a	Number of new service Users aged 65 and over provided in 2006-07 with one or more items of					
Telecare equipment in their own	homes (or equ	uivalent, such	as	extra care/ward	en housing). (2156)	
				April 2006	2006-07 Outturn	
2.10P026- 1. CASSR alone				59672	53761	
2.10P027- 2. CASSR in partner	ship with other	agency*		28114	29981	
2.10P028- 3. Other agencies w				41462	65999	
Number of projected new servic						
more items of Telecare equipme	ent in their own	homes (or ea	quiva	alent, such as e	xtra care/warden	
housing). (2157)			1			
				April 2006	2007-08 projected	
2.10P029- 1. CASSR alone				81680	72419	
2.10P030- 2. CASSR in partnership with other agency*				39894	39159	
2.10P031- 3. Other agencies without CSSR input.				43698	49455	
	2006-07	2007/08		2006/07	2007/08	
	Plan	Plan		Outturn	Projected	
	(as at	(as at Sprii	ng			
	Spring	2006)				
	2006)					
2.10P032- Total planned	£20,181,000	£21,247,00	00	£17,900,000	£26,666,000	
council expenditure on						
Telecare infrastructure.(2159)	004.070.000	0.40 504 0/		000 0 10 000	057 574 000	
2.10P033- Total planned			00	£29,949,000	£57,574,000	
council expenditure on						
Telecare equipment and						
service(2160)						

# d) Factors affecting collection and accuracy of data

CSIP are aware of the following factors in collecting the data from local authorities:

• A number of authorities have indicated that their April 2006 figures were not correct or possibly aspirational also knowledgeable staff involved in providing telecare services were sometimes not involved in providing baseline figures or making the initial 2006/7 and 2007/8 projections

- A number of authorities entered low figures in the first year (including zero entries) or did not provide figures at all
- In December 2006, the position about carry forward of Year 1 Grant was updated by DH Finance – ALL local authorities were for the first time allowed to carry over all of their remaining 2006/7 allocation into 2007/8 as long as it is spent within the year – this could have impacted on the Year 1 outturn figures as people may have spread their implementation into the second year
- Some county authorities had difficulties getting baseline information from other agencies including district councils, housing associations etc. Also many counties had not previously been involved in direct telecare service provision (in some areas this remains the case where local authorities have commissioned services from other agencies)
- Some incorrect messages and assumptions circulated around local authorities during the first year about what was included in the CSCI count. This included standalone items (eg calendar clock for people with dementia, some medication dispensers without a remote connection), upgrades to existing users with telecare, whether or not pendant alarms were included as telecare, counting users that were in care homes or in hospital. Indeed some of these had found their way from local authority feedback into early drafts of the CSCI template for 2007 and were subsequently removed to ensure consistency across all of the collection time points from 2006 to 2008. Counting equipment rather than users or counting upgrades and users in care homes would have skewed the April 2007 figures
- It was expected from Building Telecare in England (BTiE) and LAC(2006)5 that the first year would be about building infrastructure including staffing, referral arrangements, monitoring system upgrades etc. So it was recognised in advance that local authorities and their partners may not meet a 3/8 proportion of the 160,000 overall new users in the first year
- There could be some movement of PT Grant funding across to Supporting People providing services for people that probably would have already got a pendant alarm via another route in the absence of the PT Grant – this crossfunding was discouraged in LAC (2006)5 but would be difficult to prevent as the PT Grant was not ring fenced. The CSCI figures relate to telecare from any funding source (the grant is not ring-fenced, so local authorities can decide how they configure their overall funding arrangements for telecare implementation)
- The overall aim is about building on the BTiE figure of 1.4 million people with community alarms with an additional new 160,000 users and not providing 160,000 existing users with sensor upgrades to their existing pendant alarms

   upgrades to existing installations already counted should not be included as new/additional users for CSCI purposes

- The current indicator is not sensitive to users who are no longer receiving a service (eg deaths, short term use etc) – it is new/additional users only, if the equipment was re-supplied after service ceased, it could count for a further user
- Year 2 PT Grant can now be carried over into 2008/9 (announced in July 2007). 2007/8 projections of additional users could spread across into a third year

DH Policy, CSIP and CSCI have answered numerous questions from local authorities and their partners through the year to ensure that there is as much consistency as possible from 2006 to 2007. The most common questions relate to standalone items without monitoring and response and upgrades to existing installations (these are not included in the CSCI figures).

It is likely that some local authorities have reduced their Year 2 projections based on their first year's experience.

# e) Main conclusions from CSCI 2007 returns

When the 'new user' outturn for local authorities alone (53,761) is added to local authorities in partnership with another agency (29,981), then the potential 60,000\* additional users benefiting from Building Telecare in England in the first year of the PT Grant would be achieved (83,742). The figure is higher when other agencies (alone) are also included. A further 65,999 users would give a grand total of 149,741. The grand total would, of course, be based on all funding and not solely the PT Grant (CSCI guidance notes). The first two categories are more likely to reflect PT Grant expenditure.

Likewise, the first two category projections when combined would exceed the 100,000 new users targeted for this year (2007/8) and provide a projection of 111,578 new users. This rises to 161,033 when other agencies are included. It is possible that the actual outturn figures may be lower for 2007/8 as the announcement of grant carry over in July 2007 occurred after CSCI projection figures were prepared – this could spread the use of the grant over three years rather than two.

Outturn figures for infrastructure expenditure for 2006/7 was £17,900,000 and for equipment/services was £29,949,000. This compares with a first year PT Grant allocation of £30,000,000. Projections for 2007/8 are £26,666,000 for infrastructure and £57,574,000 for equipment/services. This suggests that a significant proportion of PT Grant is being used to fund services for new users.

(\*Note: A 2006/7 target was not identified by the Department of Health as it was considered that the first year would be more about building service infrastructure. The 160,000 additional users overall equates to £80m of PT Grant. The Grant is split with £30m overall in Year 1 and £50m overall in Year 2 – this equates to a split of 60,000:100,000 additional users).

It is of course possible that some local authorities may be counting in slightly different ways for the CSCI figures even though the definitions have remained consistent since 2006.

It is also possible for the CSCI returns that:

- Some elements of Supporting People or self-purchase have been included SP users could be counted as the CSCI notes indicate that reported figures can be drawn from sources beyond the PT Grant, self-purchases by users should not be included as indicated in the CSCI guidance
- Some users who may already receive a telecare service have been counted again as an upgrade eg where the 'telecare' service is a completely different arrangement from the community alarm service (typical in many county areas and in some single tier authorities as well where organisations have not partnered and not shared user data) – upgrades should not be counted in the CSCI returns

However, there is no evidence at this time that local authorities have inflated or overcounted the figures that they have submitted.

It is indeed possible that some local authorities have actually undercounted. The definition of telecare would include a basic pendant alarm and it is known that some local authorities have not fully included these in the figures for their areas – they have concentrated on more sophisticated telecare configurations with sensors etc. An example is Lincolnshire where there is a zero return for 2006/7, however, 2321 new users are known to have received telecare from other agencies during the year which has not been included.

Also, some local authorities (eg Liverpool) have commissioned services and committed expenditure in 2006/7 but the payments may not have progressed at the time of completion of the CSCI figures.

A number of local authorities will have carried over part of their Year 1 allocations

# f) Detailed CSCI returns for 2007- local authority listings

The detailed CSCI and CSIP spreadsheets will be available in early September 2007 at <u>www.icn.csip.org.uk/telecarefactsheets</u>.

Tables 1-3 in the Appendix to this newsletter provide detailed information in a simple A to Z format for 150 social care authorities who have been receiving the PT Grant.

# g) CSIP activities and next steps

Through the Telecare newsletter, CSIP has encouraged local authorities to make themselves known where they have not met their own local targets so that they can be provided with additional help and support where needed. There are still a number of services that are in launch mode. Further work is being carried out within regional and network groups and a number of additional site visits and telephone contacts have been made since April/May 2007 as organisations have prepared their figures.

There are a number of reasons for lower levels of progress in some areas including:

- late or stalled starts
- insufficient senior management support
- Difficulties in partnering arrangements with PCTs, service providers and control centres
- lack of clarity about the evidence base and how to present a business case around telecare efficiencies for future mainstreaming

The CSIP Telecare eNewsletter for July 2007 covers many of the current issues together with ideas about how they can be overcome.

#### Web link: www.icn.csip.org.uk/telecarenewsletters

Some authorities had asked whether it is possible to allow carry over of unused 2007/8 Year 2 funding into 2008/9 to provide them with more flexibility in the coming months to embed their programmes as mainstream services in 2008. This was agreed in July 2007 (the money should be spent in 2007/8 and local restrictions may apply). A carry over has its obvious advantages but would, of course, spread the 2007/8 projections into a third year leaving some local authorities and their partners short on their Year 2 projections.

After August, the 2007 figures will be incorporated into each local authority's telecare profile together with any other amendments. Local authorities have been encouraged through the CSIP newsletter to send through qualitative information, success stories and other innovations to add to their profiles which they will ultimately own.

Information will also be provided to regional organisations and networks for further local benchmarking, follow up and support.

# 2 Telecare and telehealth outcomes from the PT Grant

In early 2008, CSIP will be running a series of events to identify up to 200 outcomes from the two years of the Preventative Technology Grant.

We will be looking for examples of how telecare has been implemented across the country. In particular, we will be interested in examples where telecare and telehealth have provided positive outcomes for users, carers, staff and other key stakeholders using innovative and integrated approaches.

The September newsletter will provide more information about the planned events.

# 3 Telecare progress around the country

From time to time, the newsletter features progress from around the country with accessible web links. These include a range of initiatives from new demonstration flats to inclusion of telecare in commissioning and housing strategies.

### Bedfordshire



#### Web link:

<u>http://bedscc.gov.uk/CouncilAndDemocracy/News/PressOfficeAndCommunications/Transforming%20</u> Beds%20March%202007.pdf

# Bolton

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Web links:

http://www.bolton.gov.uk/pls/portal92/url/ITEM/350E4CB3A4DA5F99E0440003BA1DCDD2

http://www.bolton.gov.uk/pls/portal92/CMPS.newsdetailnew.show?p\_arg\_names=releaseid&p\_arg\_va lues=1325

# Brent



#### Web link:

https://www2.brent.gov.uk/press.nsf/1454664374ee54ce80256a790055374e/0591fdf7e724bf3c80257 309003b4913!OpenDocument

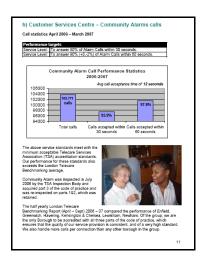
# Dorset Brigade - smoke alarms for deaf people



#### Web link:

http://www.thisisdorset.net/display.var.1605302.0.brigade\_introduces\_smoke\_alarms\_for\_deaf.php

# Enfield – call monitoring



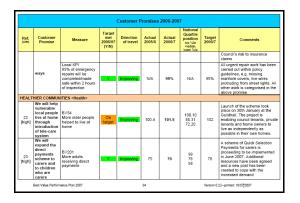
Web link: http://www.enfield.gov.uk/downloads/Customer\_Service\_Standards\_Annual\_Report\_2006-7.pdf

### Hertfordshire telecare – peace of mind for carers



#### Web site: http://news.hertsdirect.org/Release.aspx?id=6529

# Hull Best Value Performance Plan



#### Web link:

http://www.hullcc.gov.uk/pls/portal/docs/PAGE/HOME/COUNCIL%20GOVERNMENT%20AND%20D EMOCRACY/COUNCILS/COUNCIL%20POLICIES%20AND%20PLANS/BEST%20VALUE%20PLAN/ BVPP\_ANNUAL\_PLAN06\_07.PDF

# Lancashire

Lancashire Local - Pendle Meeting to be held on 8 August 2007	
	Item No. 10
	Electoral Division affected: ALL
Lancashire Telecare Service-Backgr Pendle	round and Activity within
Contact for further information: Steve Sylvest Managers. Contact:- 0779 554 1143 or 07781 Services	
Executive Summary	
This report is intended to provide an overvi (LTS), and more specifically, activity in F summary of the Lancashire Telecare Servic Pendle, together with the current number i Included within the report is a summary of the	Pendle The report provides a basic be and how the service is delivered in of Telecare referrals and installations.
Recommendation	
Lancashire Local - Pendle is asked to consid promotion and uptake of Telecare in Pendle.	er how they may influence the wide
Background	
The Government Preventative Technology resources over a two year period to invest in across the country. The purpose is to stim expansion of local services, including the Social Care, Heath and Housing. The announced in July 2004, but will only avail. Although the grant is SDm across the cour represents an allocation of approximately 21.	expanding the use of Telecare systems utate the market and pump-prime the strengthening of partnerships between preventative Technology grant was able from April 2006 until March 2008. Intry, the grant is not ring-fenced. This
The majority of the Preventative Technology to support the Lancashire Telecare service. spent on the service, including the bulk pur two preferred suppliers, (Tunstall and Ini manager and training officer posts. There is which has been carried floward into 2007/08.	As at 31 March 2007 £541k has been rchase of Telecare equipment from the tial), appointment of Telecare project an underspend of approximately £126K

#### Web link:

http://www3.lancashire.gov.uk/council/meetings/displayFile.asp?FTYPE=A&FILEID=24049

# **Midlands Housing**



#### Web link:

http://www.midlands-housing.co.uk/mnews/show-home-to-improve-independent-living-837-20.html

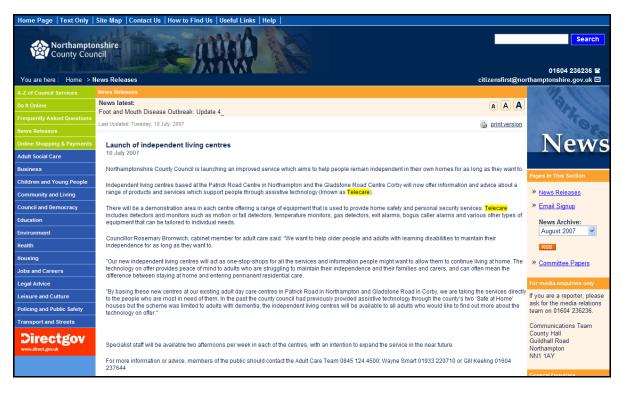
# Milton Keynes



Web links:

http://www.publictechnology.net/modules.php?op=modload&name=News&file=article&sid=9808&mod e=thread&order=0&thold=0 http://www.milton-keynes.gov.uk/community-alarm/home.asp?r=29889

### Northants – independent living centres includes telecare



Web link:

http://www.northamptonshire.gov.uk/cgibin/MsmGo.exe?grab\_id=0&page\_id=926&query=telecare&hiword=telecare%20

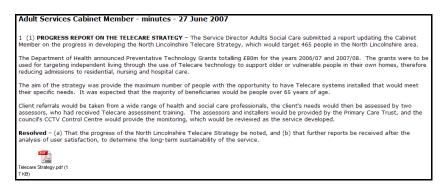
# North Hertfordshire – 25 years of careline



#### Web link:

http://www.thecomet.net/content/comet/news/story.aspx?brand=CMTOnline&category=News&tBrand =herts24&tCategory=newscomnew&itemid=WEED02%20Aug%202007%2011%3A29%3A56%3A130

### North Lincs – progress report on telecare strategy



#### Web link:

http://www.northlincs.gov.uk/NorthLincs/CouncilandDemocracy/cabinet/CabinetMinutes/AdultServices/27June2007.htm

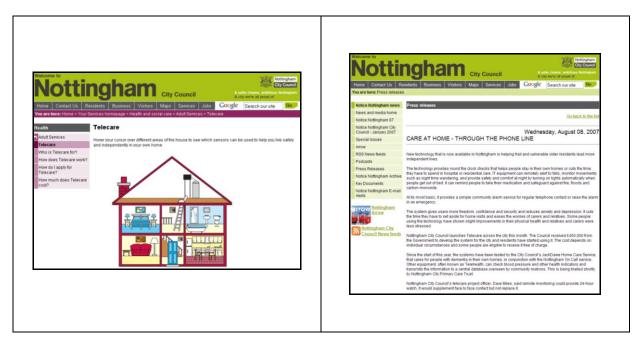
# Northumberland Housing Strategy

A Sub-Regional Housing
Strategy for
Northumberland
2007-2011
Prepared by the Northumberland Housing Board for the North East Assembly July 2007.

#### Housing Strategy - Page 62 for telecare references

Web link: http://tynedale.gov.uk/residents/showdesc.asp?id=210

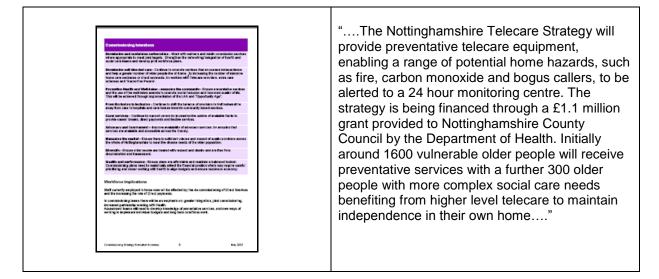
# Nottingham City Council



Web link:

http://www.nottinghamcity.gov.uk/www/telecare/default.asp http://www.nottinghamcity.gov.uk/www/pressreleases/view\_article.asp?ReleaseID=4481

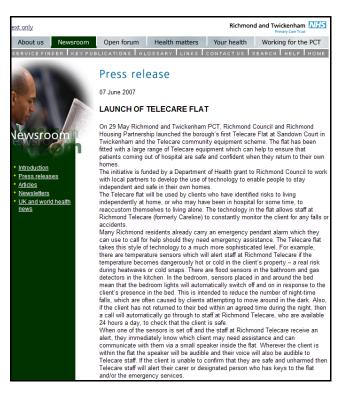
# Nottinghamshire commissioning strategies 2007-9



Web links:

http://www.nottinghamshire.gov.uk/comstratexecstrat.pdf http://www.nottinghamshire.gov.uk/comstratoverview.pdf

# Richmond - launch of telecare flat



#### Web link:

http://www.richmondandtwickenham.nhs.uk/templates/newsroom/releaseDetail.cfm/551

### Shropshire joint commissioning intentions

# 3. Joint Commissioning Intentions for 2007/08 - Older People's Services - Key priorities for action

"3.1 The development of more integrated locally based services to prevent unnecessary hospital admissions and reduce the need for long term residential care.

- To review distribution of intermediate care staff across the County.
- To review equitable provision of nursing staff by locality across the County.
- To review physiotherapy provision.
- To review provision of intermediate care beds across the County.
- Reconfigure PCT community teams into locality based interdisciplinary teams.
- Identify options and opportunities for greater integrated working between

health and social care teams.

3.2 To maximise opportunities for integrated team working both in the context of interdisciplinary team restructuring within the PCT and linked to older people community mental health teams.

3.3 To further develop Extra Care provision as an alternative to residential care that allows greater independence and can be delivered to suit service users changing needs and expectations. This will allow older people who would have entered residential care the opportunity to remain independent with greater support.

3.4 To further develop Telecare/assistive technologies applications as an important preventive option to support people in their own homes through enhancing safety and wellbeing.

3.5 To develop community based services for older people with mental health needs in the context of the ongoing plans for the redevelopment of Shelton Hospital. To reduce unnecessary admissions from care home settings through the development of a specific OPMH outreach service.

3.6 To establish a falls service specification linked to an agreed falls care pathway to develop integrated falls services grounded in evidence based prevention practice to reduce the number of older people falling.3.7 Further develop support to carers of older people through the Carers Strategy.

Web link:

http://www.shropshirepct.nhs.uk/board\_papers/pct\_board/July2007/6.6.pdf

# Solihull's recently appointed telecare co-ordinator



Web link: http://www.solihull.nhs.uk/news/story.asp?id=103

# South Derbyshire

South Derbyshire District Council	at the heart of The National Forest
	Search this site Gol
You are here: <u>Home</u> > News ar	nd Press Releases
News and Press Releases	Call For More State Of The Art Care Users
Up a level Councillor Bob Southern Chairman Flying High	Press Release 11/7/07
In <u>Control</u> <u>Chairman joins in Indian</u> <u>independence celebration</u> South Derbyshire Historical	Monitors that detect carbon monoxide and that trigger an alarm if an older person is suspected of having a fall are among state of the art Telecare equipment being launched in South Derbyshire this week.
Sourn Derbysnire Historical Gerns Skateboarding Civic More flood funding found	The District Council has invested £350,000 in updating its Careline and Lifeline systems which are currently by over 1,000 public sector tenants and over 500 older and vulnerable private householders to help them live independently for as long as possible.
Putting up the Green Flag Saturday Free Freighter Trees and Teas	The sophisticated equipment allows them to call for help around the clock every day of the year by activating alarms. With the new features being introduced this week it can even summon assistance in emergency situations without the user calling for it.
Blooming Marvellous Even more products can be recycled	South Derbyshire District Council is hoping that by making the very latest equipment available it will encourage more private homeowners to use the system.
Noisy neighbour muted Flying the Green Flag at Rosliston	In addition to the new elements provided as part of the Telecare package, new software has been installed in the control centre. This enables centre staff, based in Swadlincote, to identify exactly which alarm has been activated in a Telecare situation.
Help with the cost of flooding     Top level meeting about     flooding     Call For More State Of The Art	Representatives from services working with older and vulnerable people, including social services and health, have been invited to the control centre this week to see the new equipment. They will have a chance to see how it operates, what it can do and how it could help people with whom they work.
Care Users Sianing up South Derbyshire District Council	Chair of South Derbyshire District Council's Housing Committee Councillor John Lemmon said: "We want to fully utilise Telecare technology and because we take our housing responsibilities to mean the entire community, not just council tenants, we would like to encourage more private sector users.
Council Achieves Significant Improvements Heart of Hilton Celebration	"We hope that as many professionals as possible will come along to the control centre at Granville Court to see just how clever the system is."
Travelling Light Smoke free South Derbyshire	Telecare, which works using the telephone system, costs just £12.44 to have installed and £4.44 weekly rental.
Opening up Swadlincote <u>Woodlands</u> Forest Schools Information	Private residents interested in finding out more about it should call South Derbyshire District Council Housing Services on 01283 225810.

Web link: http://www.south-derbys.gov.uk/news/careline.htm

### Southend – telecare peace of mind and reassurance



Web link: http://www.southend.gov.uk/news/Default.asp?id=2230

# Southwark – older people benefiting from telecare



Web link:

http://www.southwark.gov.uk/Public/NewsArticle.aspx?articleId=25046

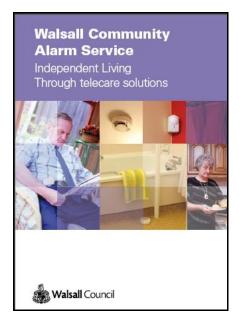
# Swindon - telehealth



#### Web link:

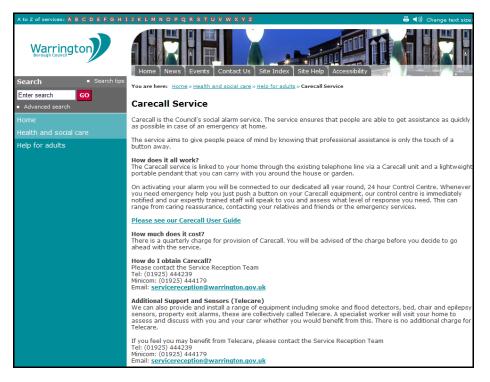
http://www.swindonpct.nhs.uk/our\_services/Telehealth.htm

# Walsall



Web link: http://www.walsall.gov.uk/33758\_com\_alarms\_leaf.pdf

# Warrington



Weblink:

http://www.warrington.gov.uk/Healthandsocialcare/Helpforadults/carecall.aspx

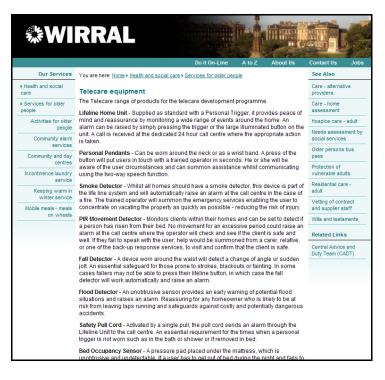
# Westminster



Web link:

http://www.westminster.gov.uk/healthandsocialcare/adultservices/homesupport/telecare.cfm

# Wirral – telecare equipment



#### Web link:

http://www.wirral.gov.uk/LGCL/100010/200091/content\_0001471.html

### York



Web link: http://www.york.gov.uk/news/newsarchive/2007/july/PR1908

# 4 Dementia and telecare – update

(Includes previous contributions from Deborah Hutchings, John Woolham, Pam Bennett and Mike Clark – see Newsletter from January 2007 with further updates from Mike Clark)

linister to bring dementia "out of the shadows"					
Department of Health	Back to Pens	artment of Health homepage			
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#### Web link:

http://www.gnn.gov.uk/environment/fullDetail.asp?ReleaseID=305344&NewsAreaID=2&NavigatedFromDepartment=False

Kable Public seg		ng and events services Public Sector Procurement events 7-8 November 2007   London
Home	Ê	News
Events		Telecare to deal with dementia
Market intelligence	,	6 August 2007
Government Comp	uting	The government is to harness new technologies in its first national dementia strategy for England
Jobs in Public Sect	or	Care services minister Ivan Lewis said there is a need to place telecare at the heart of support for people with dementia and their carers.
Services to Govern	ment	The minister was speaking at St Charles Hospital, a mental health centre for older people in North Kensington, London, on 6 August 2007, where he
Smart Healthcare		launched a project to produce the first national dementia strategy.
Subscribe	-	Lewis said that most people with dementia would prefer to stay in their own homes, but hamessing all the resources available, including the best new technologies, will be "crucial" to enabling this.
Free news by emai	i 🖂	technologies, will be crucial to enabling this.
What we do	2	"There are some really exciting things going on around the country with telecare, but it is by no means mainstream," he said. "So I think going forward that telecare will play not a side or an extra role, but it needs to be right at the heart of our capacity to support people to have maximum
		quality of life."
UK public healthcare in profile to 2010/11 The ICT health industry v experience steady grow	market vill	His view was echoed by Jenny Owen, executive director of adults, health and wellbeing for Essex CC. She said: "I think there is some really exciting potential (in telecare), particularly in the early the stages of the disease, where it's really possible to make a difference to people's quality of life." Owen will lead the development of the dementia strategy, together with Professor Sube Banerjee, professor of mental health and ageing at King's
next four years, increas £2.2bn in 2006/07 to ove in 2010/11 Published: 27 2007	ing from tr £2.6bn	College London and clinical director of mental health for older adults at the South London and Maudsley NHS Foundation Trust. Owen said that telecare is one of the areas the project group will focus on over the next 12 months.
	m more	Dementia now affects 600,000 people in the UK and this is likely to double over next three decades. Some 20% of over 80s and 5% of over 65s have some form of dementia.
Shared services in th public sector	e UK	The minister admitted that the mean families felt that the NUP and excited are did ast ment their model. Us said the meanment was separated to

Telecare to deal with dementia - 6 August 2007

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The minister was speaking at St Charles Hospital, a mental health centre for older people in North Kensington, London, on 6 August 2007, where he launched a project to produce the first national dementia strategy.

Lewis said that most people with dementia would prefer to stay in their own homes, but harnessing all the resources available, including the best new technologies, will be "crucial" to enabling this.

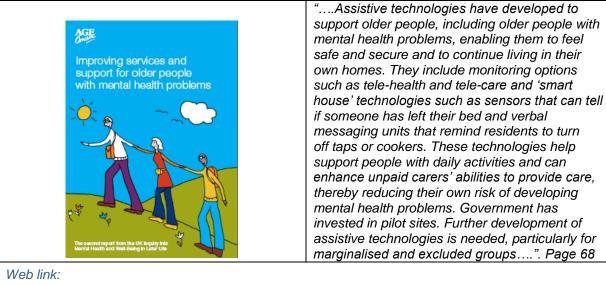
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#### Web links:

http://www.kablenet.com/kd.nsf/Frontpage/FC04E602D2E586BC8025732F0047D191?OpenDocument http://www.publicservice.co.uk/news\_story.asp?id=3542&topic=Health%20and%20social%20care



http://www.mhilli.org/documents/Inquiryfinalreport-FULLREPORT.pdf

"Dementia now affects 600,000 people in the UK and this is likely to double over next three decades. Some 20% of over 80s and 5% of over 65s have some form of dementia" (Press release for Dementia Strategy, August 2007).

Total formal costs per year in England and Wales have been estimated as £0.95 billion for men and £5.35 billion for women (McNamee, Bond, & Buck 2001).

Typically, in the past, social care organisations would have considered a care home solution where service users and carers were having difficulty coping at home.

With Telecare it is possible for some users to maintain their independence and live at home and for carers to have more time to pursue their own activities in the

knowledge that equipment and a service is in place to pick up any urgent or emergency situations.

Two of the main early projects for telecare and people with dementia are:

- Northamptonshire Safe at Home Scheme
- Croydon Aztec project

A number of other telecare services are providing home sensors for people with dementia as part of Fair Access to Care Services or as pilot project for preventative services. Nearly one third of 150 social care authorities referred to dementia support as part of their telecare implementation programmes in their CSCI returns for 2006 and many other authorities have been subsequently using telecare services to support users and carers.

Local Authority	2161 Description of telecare service(s) being implemented
Barking and Dagenham	The telecare grant will be used for environmental checks / vital signs monitoring for people with dementia in support of the LAA stretch target in relation to people with dementia.
Barnsley	The Preventive Technology Grant will be utilised to support the Barnsley Telecare Strategy in two specific areas. To support the Falls Service and Intermediate Care, bed monitors and pressure mattresses will be provided for frail older people linked to the Council's Central Call facility providing an alert if the person does not return to bed within a given time. Low level lighting will automatically turn on when the person gets out of bed. A range of developments will be funded to support people with dementia including door opening and closing warnings linked to Central Call, fridge door alarms (to signal if the person may not be eating), temperature extreme monitors, flood detectors, gas detectors/shut-off valves and medication detection alerts. The grant will also provide funding for an Assistive Technology Development Manager.
Bath & North East Somerset	To use telemedicine to assist people with chronic chest conditions manage their condition to improve quality of life and prevent unnecessary admissions to hospital. To use telecare to assist in the assessment of older people with dementia in their own homes to prevent the necessity for residential assessments in a care environment or hospital. To use telecare in an extra-care setting to ensure better quality of life and better use of staff resources.
Bexley	In line with the on-going development of telecare provision Bexley Council is developing a model of practice to support carers who are looking after relatives with dementia. This service model will aim to provide telecare products to people with dementia to enable them to remain in their own homes for as long as possible. This model will link in with current BELL, OT and Out of Hours response teams to create a robust, responsive care alternative. This model will be costed out to demonstrate savings in residential care, emergency respite care and reductions in acute hospital bed days.
	The Borough is planning to implement the following telecare services in year one of the Assistive Technology Grant allocation of £45k:
	<ul> <li>Telecare overlay to five sheltered housing schemes. This will allow for the use of all SMART technology within these settings.</li> <li>Individual smoke alarms to sheltered scheme residents which will be linked to the Forest Care Control room to ensure speedy response and action.</li> <li>Funding for a worker to promote, assess and install the assistive technology. This worker will support Care Managers when reviewing and preparing Care Support Packages in the community.</li> <li>We plan to have a store of assistive technology for speedy access to supplies.</li> <li>Funding will be set aside to assist with dementia care once research into the benefits have been concluded.</li> </ul>
Bracknell Forest	• The SMART flat will include newly developed environmental controls for people with a disability to trial and assess if these new controls can assist with their independence

Bradford	We have a comprehensive approach to the development of telecare. This involves developing the telecare infrastructure by enhancing call centre (Careline) and fast response capability. Priority will be given to older people with dementia (part of the POPPS programme) and those with moderate to intense needs where evidence shows the greatest benefits are to be had. We will deliver training for practitioners to develop knowledge and awareness of the potential of telecare and develop protocols covering assessment, commissioning, response times and equipment and maintenance. Telecare equipment will cover activity monitoring, environmental sensors and medical/ personal sensors. Core telecare systems are being built into the extra care housing schemes we are developing such as at Rowanberries, which is being developed jointly with the Methodist Homes Association After consulting with CSIP, we are piloting an exciting range of AT projects and developing the local infrastructure: • £35,000 to test out the effectiveness of a range of AT in preventing deterioration inc
	<ul> <li>avoiding unnecessary hospital/long term care admissions. The team case find vulnerable people whose needs fall below Bristol's FACS threshold.</li> <li>£60,000 for AT in intermediate care eg in an intermediate care flat in partnership with Housing 21 and Bath Institute of Mechanical Engineering who developed the technology.</li> <li>£45,000 to pilot AT for older people with dementia in partnership with AWP.</li> <li>£10,000 to pilot telehealth technology in partnership with health partners.</li> </ul>
Bristol	housing, voluntary, service user and carers.
	In the past 6 months LBB has been conducting extensive analysis of how we will be implementing telecare. A working group is investigating specific pilots to trial in 2006/07, some of which will be based on our own care link service and will be an extension of this, others will be stand alone and be more creative use of telecare.
	LBB are concentrating on the following areas · Supporting people to stay in sheltered housing · Supporting people with LD to live in the community · Supporting people with epilepsy to live in the community · Supporting people with dementia to live at home · Supporting people with ABI to live at home · Working with the PCT to investigate a telemedicine scheme for people with a LTC · Supporting carers
Bromley	A final decision will be made in the summer as to which directions our focus will be on.
Bury	Telecare pilot project will commence in July 2006 and target older people who: have had two or more falls in the last 12 months, are in intermediate care, have a long term condition and are actively case managed, have early onset dementia and a small pilot with a group of people with learning disabilities. Minimum of 200 people with a view to increasing this to 500 people in 2007/8. To roll out the service further following evaluation. A Smart Flat for staff training/user/carer demonstrations and Telecare Flats in intermediate care establishments to enable people to use the equipment before returning home. There will be a 24-7 response service and equipment will be fitted via the Age Concern Service.
	<ol> <li>Telecare services for Older People being implemented May 2006.</li> <li>Focus on service users living in own homes in community.</li> <li>Promote independence through supporting people to live at home.</li> <li>Increase choice &amp; independence for service users.</li> <li>Improve support to people with dementia &amp; their carers.</li> <li>Reduce burden on carers &amp; provide them with more personal freedom.</li> <li>Initially service will be delivered in one area of the City with plans being developed to roll out to other</li> </ol>
	<ul> <li>areas by the end 2006 followed by other service user groups.</li> <li>8. Telecare is a workstream of the Older Peoples Partnership whose membership includes user &amp; PCT representatives.</li> <li>9. Plans are also being developed with the PCT to introduce Telemedicine services from</li> </ul>
Coventry	April 2007. NRF funding secured for 06/07 and 07/08 to improve provision of specialist equipment for
Doncaster	people with disabilities or sensory impairment. A telehealth pilot project for people with chronic obstructive pulmonary disease will seek to reduce emergency admissions to hospital and facilitate early discharges. Telecare equipment will enable life style monitoring to promote independence and quality of life for older people including those with dementia. Inter professional training will raise awareness and knowledge on use of assistive technology to promote independence.

Durham	Durham has developed a telecare service model in one locality. We now plan to develop telecare across the county as a mainstream service in partnership with District Councils & PCT using pooled budgets. We aim to develop a sustainable, appropriate & responsive telecare service which can be commissioned to meet assessed health & social care needs. We will target people with dementia, hospital discharge patients, those at risk of falling & going into residential care, people with LT conditions & support carers. We will use a range of telecare equipment including bed sensors & wandering devices, etc., but will not include telehealth at this stage. We have found that using telecare helps to maintain people safely in their own homes for longer. It helps prevent 'revolving door' syndrome & provides respite for informal carers. Main barriers faced have been lack of funding & political uncertainty. We plan to pilot & develop telecare with Learning Disabilities & Children's Services. Service Model: Aiming to implement seamless service able to respond to local needs i.e. equipment, monitoring, maintenance, response from one provider. Target Client Groups: older people mental health, older people in extra care housing, people with learning disabilities, older with complex needs, older people with low needs/preventative issues e.g. falls. Partners involved; Health, Housing Departments, Voluntary Sector. Aims and Objectives of the service: To maintain independence at home, to prevent admission to acute in patient care or prolonged hospital stay. Delay the need to long-term residential care, offer support through multi-disciplinary approach, identify early stage dementia, falls prevention. Equipment: Falls detector, Flood Detector, Pill Dispenser, Occupancy Sensor, Temperature Sensor, Wristcare or similar.
East Sussex	The aim is to mainstream telecare using social care and further thought is being given to evidence based performance assessment and cost benefit evidence.
Gateshead	<ul> <li>* Technologies installed include Lifelines, Movement Sensors, Falls Detectors, Gas/Flood detectors.</li> <li>* Service available 365 days 24/7 to support people to live independently through Carecall.</li> <li>* Upgrade to PNC4 planned for June 06, to extend information held on users, range of equipment available, and out of hours response.</li> <li>* 50% clients are older people. Access via assessment or private purchasing.</li> <li>* Short-term access to Lifelines available to support hospital discharge.</li> <li>* Partnership agreement with PCT in place to deliver call handling for District Nurses (OOH) and community matrons as part of Long Term Conditions.</li> <li>* Partnership arrangements in place with PCT, Gateshead Housing company and OOH calls for Council emergency Duty Team. Link to Gateshead @ Your Service, being explored.</li> <li>* Positive outcomes being achieved supporting people with dementia to live at home (89 users).</li> </ul>
	Target group is the over 65s particularly those with dementia, those discharged from hospital & intermediate care, with continuing work to support PwLD / PD & their families. We plan to create a specialist assessor / co-ordinator post, & set up an appropriate assessment process. Develop response service linked to home care & rapid response team.
	Have established a demo suite of equip't including environmental sensors, safety & security monitors & equip't to support individual need including deployment of bed / chair occupancy sensors, pressure mats, movement detectors etc.
	Link the OT service with telecare through the development of an extended demo area & OT shop. Telecare and OT equipment will be available for assessing users linked in the same workspace as the telecare support centre to create a more seamless experience for users.
Hammersmith and Fulham	Work is continuing with other partners (community & voluntary sector, statutory services such as health & social services, Police and Fire Services).
Harrow	Infrastructure is being put in place during 2006/7 to deliver staff training and development, and to aid the supply and management of equipment through the existing Technicians service. There will be an additional supply of 24-hour/seven day contact services and response services through the existing Helpline service. It is intended that Telecare should in the long term be an integrated health, housing and social care service. The Core Package for Falls will include Flood Detectors, Smoke Detectors and Light Sensors. Core Package for Dementia will include Flood Detectors, Smoke Detectors, Light Sensors and Door Sensors. Pilot (Apr – Sep 2006) will target service users with Dementia and service users at high risk from falls. Analysis and Rollout (Oct 2006 – Mar 2007) will target wider groups of service users. Enhanced package (Mar - Oct 2007) targeted rollout to all FACS eligible over 75's in the community. Phase 4 : Exit Strategy – Joint Way Forward in order to sustain cost benefits

1	The strategy for telecare services aims to provide alarm, risk management and monitoring
	technology in a service users home in order to help reduce risk, the likelihood of an
	emergency arising or if an emergency occurs, to provide a timely response. The
	implementation of telecare is taking a phased approach, targeting higher risk needs (older
	people with dementia) initially. A phased approach will enable explicit parameters to be set
	for the target group, and the outcomes to be achieved. The range of services available are individual to meet assessed needs, and will include enhanced assistive monitoring
	technology to vulnerable/at risk individuals (e.g. alarm pendants, sensors, cameras) and
	enable emergency response care services to prevent hospital admission, further
Hillingdon	deterioration and promotion of personal safety.
	Older people with a history of falls &/or at risk due to dementia, 2 areas proven amenable to
	reduction of risk via Telecare.
	Anyone at immediate risk (e.g. person with dementia who has left gas turned on) will be offered emergency assessment & installation.
	A simultaneous pilot project of a more substantial nature is to be facilitated through a local
	community development project in an area of documented high need. FACS ensured
	through assessing personal independence, prioritising the critical & substantial levels of
	need.
	Aim:sustained reduction of over 65's falls injuries % harm/risk to people with dementia. Equipment: Occupancy monitors, lights, shut off valves & alarms.
	Service: Based on existing community alarm service. Multi-agency/not for profit
	sector/community implementation.Integrated Health & Social Care referral
Isle of Wight	pathways.Mainstreaming issues in this context and financial. Data collection built-in.
Council	Cost/Benefit: PTG reduces cost of injuries / loss of independence
	A partnership has been agreed with the Tenants Management Organisation (TMO), an
	arms length organisation managing former council housing stock, which runs a community alarm service (CAS). This service includes a 24/7 call centre and a mobile warden service
	and is available to all local residents. Most of the 2,300 alarm service users are not TMO
	tenants. The technology currently being used will support up to 12 sensors in each home.
	Following an assessment a referral is made to CAS requesting that they fit the appropriate
	sensors. The focus will be on people with dementia or at risk of falling.
Kensington and	In addition to this mainstream service there will be some small scale trials of different
Chelsea	devices, including telemedicine devices.
	The aim of the scheme is to support people with dementia and their carers within their own
	home through Telecare services. Objectives are to -
	enable people with dementia to remain living at home if the wish promote independence and choice for both client and carer
	reduce the risks of accidents and safety related incidents in and around the home
	reduce the available entry into residential, nursing and hospital care
	reduce carer stress and improve the quality of life for client and carer
	develop the project in partnership with users, carers and the independent sector
	Target Group – people with dementia who are at risk of causing a fire or wondering
	people at risk of admission to a residential/nursing home and or hospital
	carers having difficulty coping
Kingston Upon	The scheme has been developed in partnership with SWL&StGs MHT. Our intention is to
Thames	include se5rvice users and carers in defining the outcome measure for the scheme.
	A conference was held in September 2005 to identify priorities for telecare. It was agreed that services will be focused on:
	Supporting older people with dementia (and their carers) living at home
	Preventing admissions to hospital and residential care as a result of falls
	Supporting older people with long term conditions.
	We will do this by:
	Replicating 'Signal', our demonstration flat, in another area of Leicestershire in order to
	promote the use of assistive technologies and the overall benefits of telecare to users,
	carers and professionals
	• Promoting Community Alarm Services (CAS) and increasing the type of equipment and
	services available to meet the needs of older people with dementia and those at risk of falls
	<ul> <li>Working to improve responses and services linked to CAS and our overall telecare strategy.</li> </ul>
Leicestershire	

	Assessment for Telecare service has been integrated into the core assessment process in older adult social work and Intermediate Care services. Following the social work assessment, a service user who qualifies under FACS is financially assessed under Fairer Charging. In addition to those who receive Telecare services as part of their care package, the Council also provides Telecare to those deemed ineligible under FACS, who are then charged at the unit cost for the service. Our priorities for 2006/07 are • To raise awareness of new telecare sensors with social care and health professionals, and provide information and training to support expansion of service options
Lewisham	• To focus on new target groups including adults with dementia, younger vulnerable adults, and victims of hate crime.
	Merton will implement telecare using its already established MASCOT service. Merton will provide telecare to people at home, promoting independence and well-being, targeting clients with chronic conditions, dementia and those who fall, especially where admissions to hospital can be avoided. To allow timely discharge from hospital and reduced admissions to institutional care, partnerships have been formed with Housing, Health, PCT, voluntary sector and telecare suppliers. Monitors are installed to detect wandering, falls and inactivity. Personal safety and security will be maintained using smoke detectors, flood detectors, natural gas and CO detectors and support against bogus callers. To date, working with Hospital Discharge, up to eight patients a week are discharged on
Merton	time. Mascot intends to help 65 more people with telecare in 2006 - 2007 period.
	The Council's community alarm service is leading the implementation of the telecare strategy working in partnership with other social care and health services. The target groups are - long term conditions; older people with dementia and intermediate care. The service is being led by the Telecare project manager. There is open referral and joint assessment and then installation of the most appropriate package of sensors. A wide range of sensors are available. A standard charge of £1.50 a week per household and equipment free. Training and service user consultation/ evaluation all in place. Telecare backed by 24/7 mobile response service.
North Somerset	There are three main projects: 1) to provide falls detectors and bed occupancy detectors for a targeted group of older people with a history of falling who live in sheltered accommodation (in Partnership with North Somerset Housing) 2) to provide a range of equipment for an identified group of older people with dementia care managed by one of our Older People's Mental Health Teams to improve compliance with medication, relieve pressure on carers and control wandering 3) to supply equipment as appropriate to older people who are receiving services from the intermediate care service and who have been recently discharged from hospital: equipment to include: Falls detectors, medication dispensers, pressure mats/exit sensors, bed/chair occupancy sensors, PIR unit, low temperature sensors as appropriate Response will be via the Community Alarm service, wardens, carers. The service will also be accessible to care managers more generally according to need (resources permitting).
	Nottingham City Council is entering into a partnership agreement with Tunstall Telecom and the Northern Housing Consortium to facilitate a procurement and service development process for a range of monitoring and alarm packages. The project will initially focus on the Clifton area of Nottingham where a group of health and social care teams have been co- located in the new Clifton Cornerstone LIFT building. The project will aim to build on the current substantial infrastructure of fixed and dispersed alarms provided in partnership with Tunstall Telecom, and will aim to benefit an extra 900 service users over the 2 year period up to 2007. The target group will include older people with physical disabilities and those who suffer from dementia.
Nottingham	

Oxfordshire	Our telecare strategy development includes PCT's, Vol Org, alarm Providers, carers & users. We will coordinate our Telecare purchasing to achieve efficiencies, including the using exiting contracts and PASA Framework, as appropriate. Initially we will focus on environmental monitoring and target those diagnosed with early dementia, fallers, users receiving 'check visits', intermediate care users, those being considered for care home placements, medication only visits and hospital discharges. We will link our telecare strategy with the redesign of community alarm services and older people review currently being undertaken by our supporting people team. It is anticipated that we will be in a position to deliver a targeted service to those who are assessed as requiring a service. With close working with the falls service we aim to reduce hospital bed days through early intervention. Robust evaluation mechanisms will be in place and we will consider future proposals to include telehealth
Plymouth	Telecare services will be provided through a partnership between Plymouth City Council and Plymouth Teaching Primary Care Trust. We have developed a joint strategy. The main aim of the strategy will be to enable more people to live independently in their own homes using technology as an additional support. Basic equipment will be used in the first instance such as falls detectors and door alerts moving to more advanced technology such as blood pressure monitoring equipment towards the end of year 1. It is intended to pilot clients suffering from dementia (10 outputs) and then implement the service across all other client groups. Running along side this a demonstration facility will be set up to be used for staff training (10 outputs). The service will also be promoted to those not eligible for social care support.
Redcar and Cleveland	Coast & Country Housing identified as equipment provision, installation and monitoring/response plan initiator provider – already have infrastructure compatible with Telecare systems. Multiagency professional/user group consultation Initial priority groups: people with dementia, people who have fallen, people who need sitting services 'in case' and people with safety/security issues. Eligibility criteria will take preventative approach, could provide to people below FACS service bands. Demonstration/training suite (including mini monitoring centre) developed at community centre by C&CH – will be used with staff and also with potential service users/carers (mobile demonstration kit also available). C&CH identified as equipment provider after consideration of potential role of community equipment store – C&CH better placed to respond rapidly to requests to provide equipment, install and demonstrate and initiate monitoring service. Activity reports will inform reviews.
Samaraat	Developments will include setting up a referral process linked to Falls Services across the PCTs, which will include Fall detectors aimed at those of highest risk of falling. Pilot work on Telehealth will include projects for Learning Disability service users with Enuresis, Epilepsy and Fall detectors. Community alarm providers will have addition money for alarms for very vulnerable and will link with Somerset Partnership to provide smoke, flood and activity detectors. In addition work on issuing service users with dementia a range of stand alone assistive devices such as pill dispensers and pressure pad pagers to help maintain them at home and reduce carer stress. Additional money will be used to develop hospital discharge schemes and ensure consistency of community alarm provision across the county. Our Somerset Direct Service will continue to be developed to promote self-help in access to simple telecare equipment for those who fall outside our FACS criteria.
Somerset	Prevention of admission into care homes for people discharged from hospital enabling them to live in their own homes and who would otherwise go from hospital into care homes using sensors linked to using Piper Lifeline
	Younger disabled people under 65 to improve their quality of life using sensors linked to using Piper Lifeline
	Patients of two GP practices at risk of falling in order to prevent and if not possible achieve early detection of falls thereby reducing their health and financial impact using sensors linked to using Piper Lifeline
	People with dementia enabled to live independently whilst reducing the stress on their carers by using movement sensors monitored by carers through website
South Gloucestershire	Telehealth project for patients with LTC living in Kingswood locality through proactive monitoring thereby reducing the cost to the NHS.

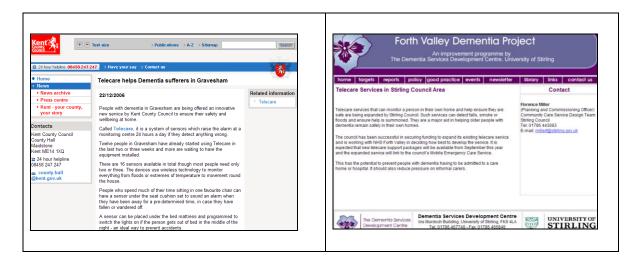
Gas/CO detectors, Falls detectors, Pressure mats/bed sensors           3 Review existing Telecare Pilot to enable decisions be made regards equipment purchase arrangements & fine-tuning of ref & assessment routes to incorporate FACS 4 Expansion of pilot rol older people with mod. to high level needs incl frail elderly, dementia & chronic disease           5 Pilot objectives to provide focused support to carers, enabling older people remain & live more safely at home, assist in hosp. discharge, & support fall & accident prevention strategies           6 Co-location opportunities explored as ICES service moves to same site as monitoring service & base for technician           Telecare developments taking place at local/county level. LPSA Vulnerable Older People agreed - community alarms provided free for first 12 weeks by participating D&Bs, in addition to the Surrey Safe at Home Project (within LAA). Multi-agency steering group esita overseeing LAA project plus multi-agency area boards established working on local initiatives. PTG planned to be used to assist partners e.g. districts/boros, PCTs to deliver locally. Target group primarily over 65s, but also Columba project combines envinoment of a residential home with telecare to re-enable OP/return home. Plans to extend project to Walton Hosp, ward to support OP with dementia to return home. Barrier = lack of awareness; fast changing lech. developments - annual conference held and training plans in progress to address this.           0 Our Telecare Strategy aims to support more people to live independently in their homes, to delay entry to residential/nursing care and to support initiatives to reduce hospital admissions and facilitate hospital discharges. A programme of 6 projects focusing on falls, dementia, leaning disabilities, extra care, intermediate care and people living at home will be delivered in partn		1 Pilot underway with show home established and technician/training officer in place. 2 Range of services provided linked to Life lines service (4000/pendants) such as Smoke detectors, Flood detectors, PIR detectors, Wandering client, Temperature extremes,
dementia & chronic disease           5 Pilot objectives to provide focused support to carers, enabling older people remain & live more safely at home, assist in hosp. discharge, & support fall & accident prevention strategies           6 Co-location opportunities explored as ICES service moves to same site as monitoring service & base for technician           Telecare developments taking place at local/county level. LPSA Vulnerable Older People agreed - community alarms provided free for first 12 weeks by participating D&Bs, in addition to the Surrey Safe at Home Project (within LAA). Multi-agency steering group estab overseeing LAA project plus multi-agency area boards established working on local initiatives. PTG planned to be used to assist partners e.g. districts/boros, PCTs to deliver locally. Target group primarily over 65s, but also PLD & PSD. Equip focuses on safety at home & falls prevention supported via community alarm teams providing 24 hour support. PI's agreed thru LAA e.g. reducing admissions. Columba project combines environment of a residential home with telecare to re-enable OP/return home. Plans to extend project to Walton Hosp, ward to support OP with dementa to return home. Barrier = lack of awareness; fast changing tech. developments - annual conference held and training plans in progress to address this.           Surrey         Our Telecare Strategy aims to support more people to live independently in their homes, to delay an integrated service model, with a vive to expanding this to include telemedicine in the reduin-term (3-5yrs). Stakeholders in social care, health, housing, voluntary and private sectors, users and carers are closely involved in developing, implementing and monitoring the service through participation in a working group.           We have joined the Northern Housing consortium for Telecare and through this we		Gas/CO detectors, Falls detectors, Pressure mats/bed sensors 3 Review existing Telecare Pilot to enable decisions be made regards equipment purchase arrangements & fine-tuning of ref & assessment routes to incorporate FACS
Stoke on Trent         E Co-Tocation opportunities explored as ICES service moves to same site as monitoring service & base for technician           Telecare developments taking place at local/county level. LPSA Vulnerable Older People agreed - community alarms provided free for first 12 weeks by participating D&Bs, in addition to the Surrey Safe at Home Project (within LAA). Multi-agency steering group estab overseeing LAA project plus multi-agency area boards established working on local initiatives. PTG planned to be used to assist partners e.g. districts/boros, PCTs to deliver locally. Target group primarily over 65s, but also PLD & PSD. Equip focuses on safety at home & falls prevention supported via community alarm teams providing 24 hour support. PI's agreed thru LAA e.g. reducing admissions. Columba project combines environment of a residential home with telecare to re-enable OP/return home. Plans to extend project to Walton Hosp, ward to support OP with dementia to return home. Barrier = lack of awareness; fast changing tech. developments - annual conference held and training plans in progress to address this.           Surrey         Our Telecare Strategy aims to support more people to live independently in their homes, to delay entry to residential/nursing care and to support initiatives to reduce hospital admissions and facilitate hospital discharges. A programme of 6 projects focusing on falls, dementia, leaning disabilities, extra care, intermediate care and people living at home will be delivered in partnership with existing services i.e. Safecall, Ageing Well and Intermediate Care. In the first 2 years, a basic set of telecare sensors will be offered through an integrated service model, with a view to expanding this to include telemedicine in the medium-term (3-5yrs). Stakeholders in social care, health, housing, voluntary and private sectors, users and carers are closely involved in developing, implemen		dementia & chronic disease 5 Pilot objectives to provide focused support to carers, enabling older people remain & live more safely at home, assist in hosp. discharge, & support fall & accident prevention
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The Telecare strategy aims to support vulnerable people and their carers, by enabling	Wandsworth	centre targeted in the first instance on older people with dementia and their carers subject to community care assessment, working with the SW London and St George's Mental Health Trust. Expanding to include younger people with dementia and people with severe disabilities, working with the PCT. In addition the Housing Department will be making a limited range of sensors available for access for people with dispersed alarm units as part of its open access WATCH service and providing a show "flat" for demonstration and training purposes. On the basis of experience in 2006/07 proposals for further development of the scheme will be recommended later in the year (exc. from 2159/60 above).
people to remain as long and as safely as possible in their own homes. The service is key to reducing risks, preventing hospital admissions and allowing safer discharges from hospital back into the community.		The Telecare strategy aims to support vulnerable people and their carers, by enabling people to remain as long and as safely as possible in their own homes. The service is key to reducing risks, preventing hospital admissions and allowing safer discharges from
Initially the service has been targeted at older people who are at the early stages of a dementia-type condition, delaying the need for more extensive services and slowing down the requirement for residential and nursing home placements. The Council and its partners are currently exploring ways of extending this service to other groups such as people with learning disabilities.		Initially the service has been targeted at older people who are at the early stages of a dementia-type condition, delaying the need for more extensive services and slowing down the requirement for residential and nursing home placements. The Council and its partners are currently exploring ways of extending this service to other groups such as people with
Image: Interning disabilities.         The service is supported and monitored by Carecall, Warrington's community alarm service which is part of the Community Services Directorate         A barrier to full mainstreaming of this service will be the increased demand on response         Warrington       services in the context of limited availability of additional resources	Warrington	The service is supported and monitored by Carecall, Warrington's community alarm service which is part of the Community Services Directorate A barrier to full mainstreaming of this service will be the increased demand on response

1	Our strategic aim is to link telecare to the development of an integrated low intensity service
	and planning to have an initial focus on falls and dementia. To achieve this aim, we are
	working in partnership with the Northern Housing Consortium. Our strategy and our
	approach incorporates working in partnership with existing community alarm providers including the 5 District/Boroughs, PCTs and Supporting People. Service users and carers,
	including the SP reference group are participating in the development of the telecare
	strategy. We are confident that the support of NHS will enable us to make rapid progress
Warwickshire	and to commence roll out in the summer.
	The Telecare Strategy is still in development although current direction is towards: a)
	Enhance Intermediate Care, b) Support people with dementia to live at home through low- key technological devices. These two areas will be achieved through funding of community
	alarms, mobile responses & telecare packages. All partners will be involved. Telemedicine
	blood pressure monitors are a consideration for Intermediate Care in conjunction with other
	detectors to help facilitate this service. PIR Activity Detectors, Wandering Client Detectors & Medicine Dispensers are amongst some of the equipment to be considered. Our
	objectives: a) Continue to reduce the need for residential/nursing care, b) Increase choice &
	independence for Service Users, c) Reduce the burden placed on Carers & provide them
	with personal freedom, d) Contribute to the care & support for people with long-term health
Mart Current	conditions, e) Reduce acute hospital admissions, f) Support Hospital Discharge & Intermediate Care.
West Sussex	* Service model based on call centre run by partner agency (Vertex); provides response to
	alarm activations 24/7.
	*Focus on older residents in own homes particularly those vulnerable to falls or dementia
	*Partners include PCT, City West Homes, Vertex, CNWL, St Mary's, Carers Network Westminster, Age Concern Westminster, The Disabled Living Foundation, Service user and
	care representatives, supplier organisation
	*Aims to help people remain living at home, with autonomy, sense of self, choice and
	control; feel safer; and support carers, timely hospital discharge, falls / accident prevention strategies
	*Peripheral sensors phased in over two years: smoke, flood extreme temperature, and falls
	detectors in year 1; bed/chair occupancy sensors, passive infra-red, and gas detectors in
Westminster	year 2 *SmartHome demonstration flat developed in partnership with Disabled Living Foundation
Westminster	We will seek to maximize the potential of assistive technology in the following ways by:
	- Exploring how the use of sensors and other equipment can be used to help prevent falls;
	- Identifying the advantages and practical use of telemedicine;
	- Exploring how frail older people, including those with dementia, can be supported via the use of assistive technology;
	- Identifying the benefits and advantages of assistive technology for family carers;
	- Assessing the cost effectiveness of assistive technology;
	<ul> <li>Developing appropriate procedures and protocols for using assistive technology;</li> <li>Identifying how existing service structures and systems that have pioneered the use of</li> </ul>
	assistive technology in the Borough, such as the Careline service, can be developed to
	enable them to offer and deliver the latest technological advantages;
Wigon	- Continuing to consult with existing and potential service users and carers to identify what
Wigan	assistive technology works for them and their preferences Target client group is older people. No impact on FACS. Prevention OTs will advise those
	who fail to meet WDC threshold.
	Last Call Service facility for response where none of registered contacts are available.
	Linking to existing 24/7 services such as WDC residential homes or extra care sheltered accommodation once established.
	Dementia care- simple equipment such as pressure mats, falls sensors, gas and flood
	alerts. Range of equipment to expand once last call service established.
	Telecare infrastructure to be established in WDC residential homes and selected sheltered housing complexes. May result in changes in role.
	In partnership with PCT, bank of telecare equipment to be used on time limited basis for
	service users/carers who are temporarily incapacitated or who could benefit from
	reablement. If equipment needed on ongoing basis to be purchased privately or from main
Makingham	equipment budget if service user meets eligibility criteria. Barrier: size of grant, PCT financial deficit.
Wokingham	

	The telecare service was established in Wolverhampton in 2005 and has been built on the existing community alarm and community equipment services. The first phase has focused on supporting people with dementia in their own homes. The Preventative Technology Grant is being used to expand the service to benefit a further 3-400 people and to run a Telemedicine pilot, in partnership with the Primary Care Trust, to test the available technology and its impact on the monitoring of long term conditions. The Grant is funding the purchase of telecare equipment and posts involved in its installation and maintenance, response to telecare alerts etc. The Telecare service will be integrated into the proposed neighbourhood support worker
Wolverhampton	service.
	Wristcare Falls Prevention at the Woodlands in Wyre Forest. An intermediate care unit of 4 flats, promoting independent living with district council warden service and input from North Reablement Team. 15 users have been equipped with wristbands from Vivatec. Aim to promote confidence whilst on scheme and on transfer home. Outcome: 75% of users comment Wristcare has made them feel more secure and 4 out of 5 users have used their Wristband. Project model to be rolled out to other reablement teams in 2006.
	Wychavon Dementia Telecare Project. 9 current users. Partnership between Evesham Older Person's Team, Older Adults Mental Health Team, Wychavon District Council and Worcestershire Telecare (local community alarm provider). Aim to reduce risk of hospital / residential care admission by use of environmental monitoring equipment. Outcome: Carers and professionals report reduced concerns about risk to users.
Worcestershire	

The main areas of risk covered by detectors include:

- Fire/smoke
- Temperature extremes
- Leaving the gas on shut-off valve
- Carbon Monoxide from a faulty gas appliance
- Wandering from home, property exit door sensors, PIR
- Falling
- Leaving a bath or sink running
- Bogus callers
- Bed occupancy
- Medication prompting or reminders



Web links:

http://www.kent.gov.uk/news/dec06-gravesham-telecare.htm http://www.dementia.stir.ac.uk/fvdp/examples/example005.htm

# Hertfordshire – telecare for people with memory loss

lertfordshire	Hertfordshire Partnership
	User and Carers Services   News   A-Z   Site Map   Leaflets   Contact us   Advanced Search   Accessibility
Home	Home > Experts to discuss innovations in mental health services
News	Experts to discuss innovations in mental health services
The Trust	On 17 July over 150 staff from the Hertfordshire Partnership NHS Trust will be meeting in Wheathampstead, together with service users, carers and invited quests. More than 30 conference
Children's Services	sessions will look at a wide range of care and treatment developments, most of which are being evaluated within the County.
Mental Health Services	Several workshops will look at the provision of care for older people. One of these will be led by Ted Maddex, who is managing a project to provide 'telecare' for people who have some loss memory. The workshop will explore how hi-tech monitoring systems can help older people to live safe and independent lives.
Specialist Learning Disability Services	
reedom of Information	Another innovative use of telecommunications technology is a system which sends people text messages to remind them of healthcare appointments. Applying this to some of the Trust's outpatient clinics this has sharply improved the proportion of people who show up for their appointments, ensuring continuity of care and effective use of staff time.
Protection and Use of Personal Information	All NHS services in the County go to great lengths to take account of the views of patients and carers. Since 2005 the users of Hertfordshire's mental health services have been represente
Equality & Diversity	by a Service User Council. In one of the workshops members of the Council will report on issues it has dealt with so far.
Membership	One of the most far-reaching projects to be discussed at the conference involves the provision of extra mental health expertise through GPs' surgeries. In three pilot areas staff from the Tru have linked up with a group of surgeries to help improve access to services such as psychological therapy.

Web link:

http://www.hertsparts.nhs.uk/Content.asp?id=SX84C6-A77FA545

Although not strictly classified as 'telecare', a range of small assistive technology devices for date/time or locating keys and other items around the home have also proved very useful.

Other assistive technology devices considered include:

- covered thermostats to prevent service users from adjusting heating inappropriately;
- locked socket covers to prevent tampering with electrical items;
- non-toxic fireproof sprays for furniture, clothing and bedding for service users who were a high fire risk (particularly as a result of smoking;
- 'wired-in' sensor lights for service users who were unable to operate lights, were at high risk of falls and who would tamper with standard sensor lights;
- bath plugs that automatically allow water out when the level exceeds a threshold;
- memo minders which allow a recorded message to be played when a person approaches an area of potential risk (such as an exit door or open fire);
- worn bracelet devices which provide local alarm if care and service users become separated;
- lockable isolation switches for gas appliances;
- electronic stop cocks.

# Southampton PCT – dementia packages

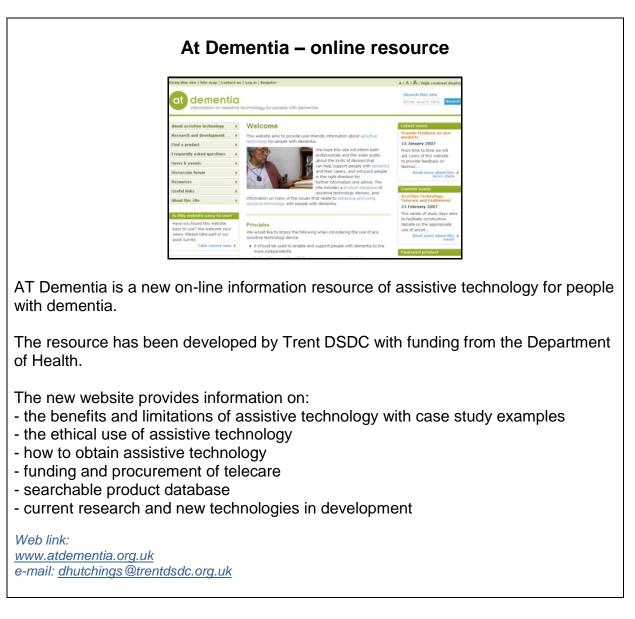


Web link:

http://www.scpctintranet.nhs.uk/equipmentstore/telecare/telecare-services--care-packages

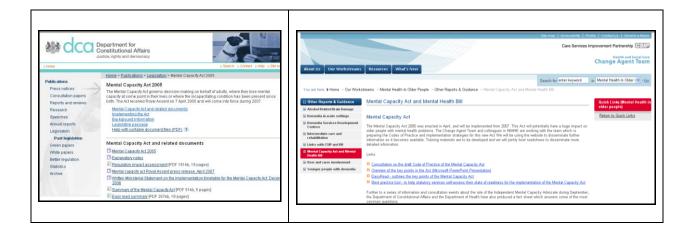
#### South Gloucestershire – carers helped by technology South Gloucestershire Council South Gloucestershire Search this site ABCDEFGHIJKLM Main topics NOPQRSTUVWXYZ Search Home Editorial Press Releases Printable version See also Carers helped by new technology Carers Carers leaflets 13 July 2007 → Home care Home care leaflet South Gloucestershire Council is using the latest technology to help carers of people living with a dementia. Occupational therapy The Just Checking system is being pioneered by the council's community care and housing department as part (+) Residential services leaflets of its Telecare programme, which uses new technologies to support carers Support and training The system was one of six finalists in the Daily Telegraph CPP Trailblazer campaign which searches for new ways of coping with modern living, including managing difficult or unforeseen circumstances. Young carers The system monitors the daily activity of a person living with a dementia. It enables carers to monitor the movements within the home of the person they care for as often during the course of a day as they need to. It can also be used by professionals as a means of assessing a person's care needs and planning the most effective way of delivering care. Currently, nine families in South Gloucestershire are using the system. Not only is it enabling some carers to continue working thanks to sympathetic employers who allow their employees internet access at work, it is also enabling family members who live in other parts of the country or even overseast to play a more active role in supporting their relative, knowing that they can raise the alarm locally if required. The system can help avoid premature or unnecessary admission to residential care for the person who has dementia. Just Checking works by having small wireless sensors carefully placed around the home. Data from these sensors are then sent via a mobile telephone connection to the Just Checking web server. A carer or relic can then log on at any time with a password to monitor the movements of the person they look after. relative Lynne Cullen cares for her father in Downend. She said: "It gives me great peace of mind. In particular it enables me to reassure my father that people are coming into the house to look after him. For a remote carer living in another part of South Gloucestershire it is an absolute godsend." Web link: http://www.southglos.gov.uk/NR/exeres/3a6e7efa-d08b-4187-8d4e-0ae22eeb1739

Care options should be provided following a person-centred assessment (single assessment, FACS etc) unless users/carers are self-purchasing outside of social care where local authorities, health trusts and third sector organisations can support the provision of independent advice. Where there has been a social care assessment, a direct payment is applicable.



Organisations implementing telecare should consider the ethical and consent issues for supporting people with dementia. These are considered in the Astrid Guide.

Organisations implementing telecare should also have regard to the Mental Capacity Act for England.



Web links:

http://www.dca.gov.uk/menincap/legis.htm http://www.cat.csip.org.uk/index.cfm?pid=231

A control centre with appropriate equipment can effectively monitor the alerts from sensors and peripherals. Suppliers can advise on whether a control centre is capable of monitoring alerts. Also, some services are looking at providing equipment to carers to receive the alerts directly without going through a control centre. Care needs to be taken to ensure that risks are included within care plans.

There is growing interest in lifestyle monitoring for people with dementia – this involves picking up activity/inactivity in and around the home.

Technology has the potential to benefit people with mild as well as severe dementia but the kinds of technology social response protocols and service design would need to differ.

Some telecare services have demonstration facilities which can be helpful for user, carer and staff understanding as to how telecare could make a difference as part of a care plan.

Both Northamptonshire and Croydon have identified areas for potential savings in supporting users with dementia at home in their telecare projects. More information is included in the web links.

The NHS PASA National Framework Agreement for telecare provides an electronic catalogue (E Cat) of equipment and services that can be used in supporting people with dementia.

# Summary of Web Links (CSIP is not responsible for external links and does not endorse specific telecare goods or services)

Links for Northamptonshire (jwoolham@northamptonshire.gov.uk): Woolham J. The effectiveness of assistive technology in supporting the independence of people with dementia: the Safe at Home project. Hawker Publications, 2005. ISBN 1-874790-77-99. http://www.astridguide.org/ http://www.ehiprimarycare.com/news/item.cfm?ID=1569

#### http://www.prweb.com/releases/2005/11/prweb313515.htm

Reflections on ethics, dementia and technology. Baldwin, C. in Woolham, J. (ed) Assistive Technology in dementia care. Hawker publications 2006

Steven Wey's paper 'One size does not fit all' in Marshall, M Perspectives on Rehabilitation and Dementia (Jessica Kingsley, 2004) ISBN: 9781843102861

#### Links for Croydon:

http://www.croydon.gov.uk/candd/communication/pressrel/y2005/287440/287001?a= 5441 http://www.eet.org.uk/powpublic/oppuel/pdf/M/ED\_Deily.pdf

http://www.cot.org.uk/newpublic/annual/pdf/WED\_Daily.pdf

#### Other links of interest:

Telehealth Home Monitoring of Solitary Persons With Mild Dementia:

http://aja.sagepub.com/cgi/content/abstract/22/1/20 http://www.cat.csip.org.uk/\_library/docs/Housing/Case%2003%20rev.pdf http://www.bath.ac.uk/bime/home.php?nl=projects/dc\_projects.html&mt=projects http://www.alzheimers.org.uk/Research/Library/reading\_lists/Reading%20list\_assisti ve%20technology.pdf http://dem.sagepub.com/cgi/reprint/3/3/281 http://www.enableproject.org/html/finalconference.html http://dem.sagepub.com/cgi/content/refs/3/3/297

#### Dementia and the NSF for Older People – Standard 7:

http://www.dh.gov.uk/PolicyAndGuidance/HealthAndSocialCareTopics/OlderPeoples Services/OlderPeopleArticle/fs/en?CONTENT\_ID=4002284&chk=q4tpUL

#### **Dementia Services Development Centres in England:**

http://www.dsdcengland.org.uk/

Additional references:

MRC CFAS Medical Research Council Cognitive Function and Ageing Study Group 1998, "MRC CFAS Medical Research Council Cognitive Function and Ageing Study Group: Cognitive function and dementia in six areas of England and Wales: the distribution of MMSE and prevalence of GMS organicity level in the MRC CFA study", *Psychological Medicine*, vol. 28, pp. 319-335.

Clegg, A., Bryant, J., Nicholson, T., Gerrard, K., McIntyre, L., de Broe, S., & Waugh, N. 2000, *Clinical and cost effectiveness of Donepezil, Rivastigmine and Galantamine for Alzheimer's disease*, Wessex Institute for Health Research and Development, Southampton.

McNamee, P., Bond, J., & Buck, D. 2001. Costs of dementia in England and Wales in the 21st century.", *British Journal of Psychiatry*, vol. 179, pp. 261-266.

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			Community (Social)	Alarms	View All Items
▼ EXPLOR	🗠 🔚 Home Management	~	Product Name		
œ.	Incontinence Products				
æ	Orthoses				
	Prosthetic Socks		Supplier Product Code		
	Pushchairs Prams & Buggies				
	Special Seating		Product Description		
	Special Seating Accessories				
	Spinal Support     Stoma Care Products				
	Stoma Care Products     Gare Action of the services		Product Description 2		
	Packages, incl. integrated systems for telehealth				
	Services (see also under packages)		eClass Code		
	Telecare equipment				
	🕸 🛅 Community (Social) Alarms 🖣		Supplier Name		
	🖶 🚍 Home activity, lifestyle & environmental monit	ors	Supplier Name		
	Reducing accidents and incidents in the home				
	🗄 🧰 Telehealth equipment		Brand		
	Telecare Spares & Accessories				
	Visual Aids		Model Name		
	Walking Aids     Wheelchairs				
	Wigs		DbID		
	)H Chemicals & Reagents				
	I Dental & Optical	_	Search Now	1	
		×			

#### Supplier information about dementia

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The telecare eNewsletter for September 2007 will include supplier updates.

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# 5 'Open House' at CUHTec Responsive Home

#### Item provided by Rachel Dare at CUHTec (r.dare@psychology.york.ac.uk)

Researchers at the Centre for Usable Home Technology (CUHTec) at the University of York recently held an open day to showcase a number of innovative home technologies and telecare applications. The venue for this well-attended event was CUHTec's Responsive Home, a 3-bedroomed bungalow on the University campus which has been set up as an exhibition of existing and future home technologies each of which demonstrates a real human need.

Projects featured on the open day included 'Journeys between ourselves' by Jayne Wallace, the digital jeweller from Culture Lab, Newcastle University. Jayne demonstrated her latest pieces developed for the intergeneration project funded by the University of York. The project builds directly upon Jayne's doctoral research approach and methods to develop digital jewellery that is personally meaningful for the individuals involved in the project. The resulting pieces are a pair of necklaces made for the mother and daughter involved in the project.



The necklaces are made from porcelain, paper, felt and electronic components. The pieces are a response to stories and experiences shared with Jayne by the participants. Light sensors within the neckpieces are sensitive to direct changes in light – once a neckpiece is touched or held by the wearer the electronic components send a signal to the other neckpiece, which trembles in response. Bespoke developments of motes (ad hoc wireless computers) and sensors form a network that allows the neckpieces to communicate wirelessly. "Its purpose is to explore the notion of shared presence with the eventual goal of involving older people in the lives of their adult children, and vice versa" commented Jayne.

Jayne explained "We developed this haptic and tactile way of interacting with the neckpieces with the hope of facilitating a gentle, human centred mode of communication. We consider the resulting reflection and critical analysis of this dialogue as an important output of this research endeavour. Our intention is not to dictate to our participants an intended function, role, or context of "use", but to explore our participants' feelings about the pieces and their significance in their lives and relationship."

Other technologies on display at the open day were:

Messages for Mary

A low cost solution to wandering (a problem in the early stages of dementia) which involves motion detectors and luminescent displays, as an alternative to the commonly used audio messages

- Choosing the right knob Joe Wherton's research addressing the problem of how to prompt people who have problems remembering which knob controls which hot plate on a stove. In addition, his experiments address the problem of novelty when designing for people with dementia.
- A Virtual Frosted Window Out of sight is out of mind but video monitoring violates our need for privacy. This conceptual design from CUHTec may not suggest a solution but it could provoke design.

The open day is one of several events and courses run by CUHTec, a joint venture set up nearly four years ago between the University of York and the Joseph Rowntree Foundation with the aim of ensuring that future home technologies meet real social and personal needs. Since its creation in September 2003 CUHTec has run 9 telecare training courses, 2 one-day telecare events, 2 international conferences and 2 one-day workshops.

The next CUHTec event is a one-day course on 25<sup>th</sup> September 2007 for telecare service providers entitled "Evaluating and expanding your telecare service". To find out more about CUHTec and CUHTec events and training activities, please visit the web site at <u>www.cuhtec.org.uk</u>.

## 6 Other news items

a) Web tool launched to improve life expectancy in disadvantaged areas

Dawn Primarolo, Minister of State for Public Health has launched the Health Inequalities Intervention Tool - an interactive website to help local health services and councils improve life expectancy in areas with the worst health and deprivation.

Web link:

http://www.gnn.gov.uk/environment/fullDetail.asp?ReleaseID=309566&NewsAreaID=2&NavigatedFro mDepartment=False

b) Department of Health opens £73m investment fund for Social Enterprise programmes

Care Services Minister Ivan Lewis has announced the opening of a £73m Social enterprise Investment Fund for health and social care. Applications for the money can now start, to set up and build social enterprises that meet specific needs and provide services that will benefit local communities.

Web link:

http://www.gnn.gov.uk/environment/fullDetail.asp?ReleaseID=308383&NewsAreaID=2&NavigatedFro mDepartment=False

c) Self care support: The evidence pack - summary of work in progress 2005-07.

Web link:

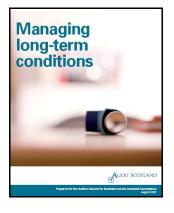
http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH\_0 76913

d) A new ambition for stroke - a consultation on a national strategy

This consultation document sets out the views of six working groups contributing to the development of the National Stroke Strategy, on the challenges currently facing stroke services in England and how these can be met. It invites everyone to give their views, by 12 October 2007, on the ideas set out in the document, as well as contribute new ideas to the debate.

Web link: <u>http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH\_0</u> 76573

e) Managing Long Term conditions in Scotland, Audit Scotland (2007)



Web link:

http://www.audit-scotland.gov.uk/publications/pdf/2007/nr\_070816\_managing\_long\_term.pdf

 f) Homes for the Future: More Affordable, More Sustainable - Housing Green Paper (CSIP Summary, August 2007)

Web link:

http://www.icn.csip.org.uk/housing/index.cfm?pid=522&catalogueContentID=2270

## 7 Telecare events

a) Regional Housing LIN dates for 2007:

Here is the list of the upcoming Housing LIN regional meeting

30/08/07	Eastern Regional Housing LIN meeting
13/09/07	South West Regional Housing LIN Event - Bristol
26/09/07	Resident Involvement in Sheltered Housing - A Workshop
04/10/07	South East Regional Housing LIN meeting
24/10/07	Yorkshire & Humberside Housing LIN meeting
01/11/07	West Midlands Regional Housing LIN Event
15/11/07	North West Regional Housing LIN meeting

Web link: http://www.icn.csip.org.uk/housing/index.cfm?pid=167&eventID=67

Housing LIN Newsletter – August 2007

Web link:

http://www.icn.csip.org.uk/\_library/Resources/Housing/Support\_materials/Newsletter/Newsletter24.pdf

b) Carers UK - New Horizons - Supporting families through telecare solutions

CSIP's Clare Skidmore will be providing a PT Grant update presentation.

Thursday 6th September 2007, Business Design Centre, London N1

Web link:

http://www.carersuk.org/Policyandpractice/NewHorizonsConference

c) West Midlands Network

Wolverhampton – 11 September 2007

For more information contact Sue Williams (<u>sue.williams@csip.org.uk</u>)

d) North/North West Telecare (Lancs, Cheshire, Cumbria, Durham)

14 September 2007

For more information contact Steve Sylvester (Stephen.Sylvester@SSD.LancsCC.Gov.Uk)

e) Yorkshire Group (Calderdale, Leeds, Bradford, Kirklees, Wakefield)

Whitley Bridge - 18 September 2007

For more information contact Sharon Jarvis (<u>Sharon.Jarvis@calderdale.gov.uk</u>)

f) Technology in Dementia Care

Promoting independence and well-being through telecare and assistive technology: a national perspective - Clare Skidmore, Extra Care Housing Programme Manager, Care Services Improvement Partnership Housing Learning and Improving Network

3 October 2007, Birmingham

Web link: http://www.careinfo.org/conferences/tech07.pdf

g) Telecare 2007 – 27 September 2007

Title: Telecare 2007 Date: 27 September 2007 Venue: Lakeside Conference Centre, Aston University, Birmingham, UK Entry: Free for participants from the NHS, Social Services, healthcare and third sector organisations Web site: <u>www.telecare-events.co.uk</u> Organiser: BJHC Events Ltd

CSIP's Mike Clark will be joining other colleagues from UK telecare programmes at Telecare 2007.

This one-day event, centred on case-history presentations with a supporting exhibition, will primarily focus on disseminating the capabilities of telecare technologies and advancing the knowledge of people commissioning telecare services in the UK and Europe about what products and systems are available and how best to deploy them.

h) Telecare Services Association (TSA) Conference – Cardiff, 6-8 November 2007

CSIP's Nigel Walker and Judith Whittam will be speaking at the TSA Conference along with Claire Whittington (White Paper Long Term Conditions Demonstrator Programme).

The National Telecare & Telehealth Conference will take place in Cardiff, November  $6^{th} - 8^{th}$ . The event which attracted almost 400 delegates last year will bring together the single largest gathering of Telecare & Telehealth professionals in the UK this year. With the interest generated by the Whole System Demonstrator Sites there will be significant focus on Telehealth with added international perspective.

Web link: <u>http://www.telecare.org.uk/event/42301/46596/tsa\_annual\_conference\_2007.htm</u>

The Foundation for Assistive Technology (FAST) provides a full listing of forthcoming telecare events – see <u>http://www.fastuk.org/services/events.php?pg=2</u>. Suppliers also run telecare and telehealth events – check their web sites regularly for dates.

All previous telecare eNewsletters are available at: <u>www.icn.csip.org.uk/telecarenewsletters</u>

#### **CSIP** Telecare Services

You can send comments and questions about the CSIP Implementation Guide, factsheets or other resources or contact us via <u>telecare@csip.org.uk</u>. Also, use this mailbox to send in good practice examples.

If you or a colleague would like to receive future copies of the newsletter then all you need to do is register at <u>http://www.icn.csip.org.uk/index.cfm?pid=12</u>

# Appendix - Detailed CSCI returns for 2007- local authority listings

Tables 1-3 in the Appendix to this newsletter provide detailed information in a simple A to Z format for 150 social care authorities who have been receiving the PT Grant.

Local authority	Local authority outturn	Local authority + agency outturn	Other agencies outturn
Barking & Dagenham	170	13	0
Barnet	93	311	0
Barnsley	150	450	552
Bath and North East Somerset	379	24	0
Bedfordshire	0	76	231
Bexley	488	364	433
Birmingham	70	1834	647
Blackburn with Darwen	171	98	80
Blackpool	166	0	0
Bolton	480	0	0
Bournemouth	403	24	0
Bracknell Forest	225	0	0
Bradford	300	42	0
Brent	295	58	173
Brighton & Hove	530	36	0
Bristol	632	113	398
Bromley	532	20	0
Buckinghamshire	10	0	0
Bury	369	0	0
Calderdale	2458	1400	715
Cambridgeshire	50	58	904
Camden	336	35	5
Cheshire	590	1149	0
City of London	3	26	0
Cornwall	50	476	1854
Coventry	310	157	0
Croydon	619	126	79
Cumbria	326	5788	5063
Darlington	37	0	0
Derby	281	0	0
Derbyshire	8	1056	0
Devon	712	0	936
Doncaster	513	40	0
Dorset	0	60	9000
Dudley	619	0	0
Durham	44	1132	432
Ealing	306	46	0
East Riding of Yorkshire	478	23	0
East Sussex	196	986	6000
Enfield	2124	640	0

Table 1 – Additional users for 2006/7 from identified sources

Essex	205	0	2019
Gateshead	319	394	0
Gloucestershire	97	0	1447
Greenwich	706	0	0
Hackney	0	396	0
Halton	225	69	0
Hammersmith & Fulham	190	16	0
Hampshire	60	76	1334
Haringey	692	64	10
Harrow	194	0	0
Hartlepool	0	90	0
Havering	601	267	0
Herefordshire	116	0	211
Hertfordshire	1	544	108
Hillingdon	0	110	0
Hounslow	262	11	0
Isle of Wight	446	10	69
Isles of Scilly	2	0	8
Islington	26	114	0
Kensington & Chelsea	112	0	196
Kent	603	0	0
Kingston upon Hull	407	13	10
Kingston upon Thames	5	434	92
Kirklees	658	78	23
Knowsley	110	15	719
Lambeth	230	0	149
Lancashire	0	107	0
Leeds	431	28	1208
Leicester	315	0	19
Leicestershire	53	1028	0
Lewisham	385	0	0
Lincolnshire	0	0	0
Liverpool	0	157	0
Luton	78	0	0
Manchester	860	33	0
Medway	537	182	2315
Merton	260	0	155
Middlesbrough	247	183	0
Milton Keynes	98	10	0
Newcastle upon Tyne	0	466	0
Newham	1171	0	0
Norfolk	14	600	76
North East Lincolnshire	940	0	3704
North Lincolnshire	4470	9	0
North Somerset	472	107	15
North Tyneside	742	0	0
North Yorkshire	0	324	1152
Northamptonshire	232	0	270
Northumberland	14	200	0
Nottingham	54	485	64
Nottinghamshire	0	889	0
		10	0
Oldham	//0		
Oldham Oxfordshire	720 99	10	948

Plymouth	308	92	398
Poole	83	447	0
Portsmouth	871	0	0
Reading	1	48	35
Redbridge	482	0	0
Redcar & Cleveland	411	0	0
Richmond upon Thames	218	128	40
Rochdale	223	28	173
Rotherham	748	120	0
Rutland	6	58	10
Salford	448	0	0
Sandwell	84	456	0
Sefton	425	0	10
Sheffield	1312	0	0
Shropshire	1095	329	353
Slough	168	221	000
Solihull	0	407	108
Somerset	595	0	0
South Gloucestershire	242	69	0
South Tyneside	95	0	0
Southampton	3500	0	0
Southend-on-Sea	36	128	0
Southwark	421	56	0
St Helens	660	0	0
Staffordshire	276	0	4018
	0	278	
Stockport Stockton-on-Tees	24	0	500
Stoke-on-Trent	1287	0	0
Suffolk	79		451
Sunderland	411	240	451
	85		5432
Surrey		500	
Sutton	124	0	230
Swindon	8	0	0
Tameside	339	70	0
Telford & the Wrekin		186	
Thurrock	167	75	0
Torbay	249	0	0
Tower Hamlets	200	0	0
Trafford	240	60	0
Wakefield	4	150	580
Walsall	987	82	0
Waltham Forest	202	0	0
Wandsworth	548	0	0
Warrington	483	197	24
Warwickshire	0	40	320
West Berkshire	0	50	235
West Sussex	0	199	0
Westminster	0	121	0
Wigan	0	213	0
Wiltshire	0	493	4664
Windsor & Maidenhead	76	70	54
Wirral	84	49	0
Wokingham	10	2	0
Wolverhampton	696	7	0

Worcestershire	60	15	4541
York	365	0	0
Total	53761	29981	65999

## Table 2 – Projections of new users for 2007/8

Local authority	2.10P029 Local Authority 2007- 08 Projected	2.1OP030 Local authority and agencies 2007-08 Projected	2.10P031 Other agencies 2007-08 Projected
Barking & Dagenham	300	40	0
Barnet	200	350	0
Barnsley	600	228	98
Bath and North East Somerset	380	60	0
Bedfordshire	0	400	200
Bexley	585	414	500
Birmingham	500	3000	64
Blackburn with Darwen	320	120	95
Blackpool	80	0	0
Bolton	500	50	0
Bournemouth	220	24	0
Bracknell Forest	279	0	0
Bradford	450	42	0
Brent	200	50	17
Brighton & Hove	500	38	0
Bristol	1070	110	480
Bromley	570	0	0
Buckinghamshire	388	200	0
Bury	470	0	0
Calderdale	2550	1300	0
Cambridgeshire	150	232	1000
Camden	370	6	35
Cheshire	664	930	0
City of London	10	10	0
Cornwall	150	1500	1500
Coventry	370	260	0
Croydon	350	450	100
Cumbria	200	0	0
Darlington	100	42	0
Derby	300	0	0
Derbyshire	20	1667	1000
Devon	850	0	950
Doncaster	500	250	0
Dorset	0	240	9040
Dudley	975	0	0
Durham	35	1466	414
Ealing	446	46	0
East Riding of Yorkshire	537	0	0
East Sussex	377	1006	6120
Enfield	217	45	0
Essex	3000	866	2500
Gateshead	250	10	0

Gloucestershire	350	160	500
Greenwich	700	25	0
Hackney	200	250	0
Halton	300	40	0
Hammersmith & Fulham	310	16	144
Hampshire	350	100	1500
Haringey	112	10	0
Harrow	283	0	0
Hartlepool	0	362	0
Havering	1171	267	0
Herefordshire	313	0	123
Hertfordshire	533	1473	12
Hillingdon	160	120	0
Hounslow	365	60	0
Isle of Wight	450	0	0
Isles of Scilly	430	3	0
Islington	125	114	0
Kensington & Chelsea	300	0	200
Kent	1020	0	0
Kingston upon Hull	200	450	0
Kingston upon Thames	10	400	50
Kirklees	1000		20
	120	150 25	
Knowsley			70
Lambeth	400	15	50
Lancashire	0	1800	0
Leeds	1500	0	2300
Leicester	300	57	0
Leicestershire	300	1200	40
Lewisham	609	0	0
Lincolnshire	600	200	0
Liverpool	250	190	0
Luton	160	0	0
Manchester	903	35	5
Medway	200	50	100
Merton	300	0	155
Middlesbrough	250	200	0
Milton Keynes	75	10	0
Newcastle upon Tyne	0	667	0
Newham	1727	0	0
Norfolk	70	630	100
North East Lincolnshire	300	923	0
North Lincolnshire	4900	12	0
North Somerset	500	100	15
North Tyneside	750	0	0
North Yorkshire	0	1418	0
Northamptonshire	1250	600	0
Northumberland	986	400	0
Nottingham	114	750	70
Nottinghamshire	0	1515	0
Oldham	1500	50	0
Oxfordshire	360	100	948
Peterborough	220	0	0
Plymouth	390	120	400
Poole	240	450	0

Portsmouth	931	40	0
Reading	150	40	40
Redbridge	602	0	0
Redcar & Cleveland	520	0	0
Richmond upon Thames	340	130	40
Rochdale	200	70	60
Rotherham	748	50	0
Rutland	50	60	10
Salford	514	0	0
Sandwell	125	450	0
Sefton	610	150	50
Sheffield	1351	39	0
Shropshire	1400	280	200
Slough	250	241	0
Solihull	0	475	140
Somerset	850	0	0
South Gloucestershire	280	100	0
South Tyneside	450	20	0
Southampton	4100	0	0
Southend-on-Sea	40	80	0
Southwark	720	100	0
St Helens	600	0	0
Staffordshire	400	0	4420
Stockport	400	325	500
Stockton-on-Tees	200	50	0
Stoke-on-Trent	1500	300	0
Suffolk	400	500	530
Sunderland	750	0	0
Surrey	480	600	6000
Sutton Swindon	<u> </u>	0	250
			0
Tameside	185	100	0
Telford & the Wrekin	2	235	0
Thurrock	200	120	0
Torbay	350	50	0
Tower Hamlets	400	120	0
Trafford	300	60	0
Wakefield	20	350	700
Walsall	1200	250	0
Waltham Forest	250	0	0
Wandsworth	500	0	0
Warrington	494	290	25
Warwickshire	0	250	320
West Berkshire	0	60	250
West Sussex	0	300	0
Westminster	0	180	0
Wigan	0	504	0
Wiltshire	0	880	0
Windsor & Maidenhead	106	98	55
Wirral	487	10	0
Wokingham	240	18	0
Wolverhampton	696	15	0
Worcestershire	540	200	4950
York	100	0	0

Total
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	2.10P032 2006- 07 Outturn Infrastructure	2.10P032 2007-08 Projected Infrastructure	2.10P033 2006- 07 Outturn Eqpt/Services	2.10P033 2007-08 Projected Eqpt/Services
Local authority	000	000	000	000
Barking & Dagenham	154.00	449.00	828.00	943.00
Barnet	65.00	97.00	84.00	133.00
Barnsley	78.00	310.00	893.00	1,152.00
Bath and North East				
Somerset	21.00	41.00	247.00	300.00
Bedfordshire	99.00	180.00	81.00	133.00
Bexley	40.00	20.00	121.00	100.00
Birmingham	123.00	700.00	223.00	2,000.00
Blackburn with Darwen	20.00	28.00	27.00	129.00
Blackpool	-	-	110.00	182.00
Bolton	1,164.00	1,340.00	282.00	536.00
Bournemouth	360.00	-	471.00	281.00
Bracknell Forest	21.00	36.00	24.00	39.00
Bradford	33.00	129.00	130.00	358.00
Brent	62.00	66.00	204.00	370.00
Brighton & Hove	50.00	50.00	150.00	170.00
Bristol	130.00	180.00	113.00	489.00
Bromley	13.00	50.00	38.00	157.00
Buckinghamshire	189.00	72.00	40.00	312.00
Bury	188.00	214.00	64.00	186.00
Calderdale	33.00	58.00	190.00	300.00
Cambridgeshire	85.00	187.00	215.00	320.00
Camden	242.00	249.00	922.00	1,022.00
Cheshire	42.00	80.00	349.00	619.00
City of London	16.00	12.00	10.00	12.00
Cornwall	59.00	150.00	180.00	590.00
Coventry	39.00	66.00	81.00	304.00
Croydon	115.00	200.00	37.00	150.00
Cumbria	23.00	136.00	226.00	470.00
Darlington	114.00	50.00	96.00	199.00
Derby	27.00	163.00	66.00	118.00
Derbyshire	49.00	49.00	400.00	800.00
Devon	25.00	107.00	285.00	503.00
Doncaster	-	-	51.00	292.00
Dorset	52.00	153.00	32.00	192.00
Dudley	38.00	65.00	498.00	920.00
Durham	-	100.00	10.00	458.00
Ealing	154.00	206.00	66.00	147.00
East Riding of Yorkshire	8.00	21.00	87.00	86.00
East Sussex	44.00	93.00	185.00	600.00
Enfield	264.00	448.00	55.00	164.00
Essex	63.00	177.00	213.00	1,640.00
Gateshead	912.00	1,100.00	267.00	185.00
Gloucestershire	34.00	92.00	169.00	460.00
Greenwich	98.00	70.00	900.00	935.00
Hackney	140.00	180.00	742.00	1,228.00
Halton	39.00	52.00	443.00	463.00
Hammersmith & Fulham	730.00	858.00	27.00	100.00
Hampshire	62.00	85.00	52.00	198.00
Haringey	37.00	22.00	607.00	140.00

# Table 3 – Outturn expenditure for 2006/7 and projected expenditure for 2007/8(split into infrastructure and equipment/services) (£000)

CSIP Telecare eNewsletter

	111.00	100.00	45.00	100.00
Harrow Hartlepool	111.00 78.00	123.00 97.00	15.00 140.00	100.00 160.00
Havering	94.00	101.00	38.00	115.00
Herefordshire	25.00	74.00	138.00	167.00
Hertfordshire	41.00	179.00	6.00	708.00
Hillingdon	18.00	61.00	0.00	268.00
Hounslow	50.00	64.00	48.00	139.00
Isle of Wight	50.00	04.00	75.00	171.00
Isles of Scilly	1.00	1.00	1.00	1.00
Islington	89.00	164.00	60.00	80.00
Kensington & Chelsea	09.00	75.00	70.00	193.00
Kent	370.00	353.00	525.00	555.00
Kingston upon Hull	127.00	275.00	215.00	336.00
Kingston upon Thames	1.00	12.00	46.00	128.00
Kirklees	93.00	123.00	797.00	919.00
Knowsley	120.00	150.00	185.00	185.00
Lambeth	102.00	200.00	508.00	510.00
Lancashire	51.00	171.00	365.00	1,000.00
Leeds	64.00	163.00	199.00	585.00
Leicester	678.00	731.00	287.00	293.00
Leicestershire	77.00	525.00	23.00	175.00
Lewisham	170.00	213.00	707.00	759.00
Lincolnshire	20.00	204.00	388.00	476.00
Liverpool	-	235.00	-	660.00
Luton	25.00	40.00	87.00	148.00
Manchester	25.00	50.00	277.00	444.00
Medway	51.00	52.00	90.00	188.00
Merton	96.00	170.00	91.00	115.00
Middlesbrough	472.00	567.00	214.00	105.00
Milton Keynes	30.00	60.00	72.00	182.00
Newcastle upon Tyne	10.00	41.00	135.00	409.00
Newham	500.00	1,013.00	580.00	1,174.00
Norfolk	419.00	300.00	123.00	613.00
North East Lincolnshire	-	-	111.00	160.00
North Lincolnshire	240.00	250.00	300.00	412.00
North Somerset	437.00	425.00	155.00	340.00
North Tyneside	23.00	229.00	142.00	201.00
North Yorkshire	183.00	285.00	200.00	261.00
Northamptonshire	180.00	200.00	60.00	342.00
Northumberland	48.00	48.00	150.00	284.00
Nottingham	14.00	92.00	3.00	339.00
Nottinghamshire	29.00	83.00	1,239.00 136.00	2,145.00
Oldham Oxfordabira	30.00	60.00		227.00
Oxfordshire Peterborough	36.00 23.00	84.00	124.00 7.00	590.00 115.00
Peterborougn	42.00	38.00	12.00	275.00
Poole	342.00	60.00 387.00	144.00	175.00
Portsmouth	64.00	67.00		90.00
Reading	1.00	6.00	-	100.00
Redbridge	7.00	2.00	58.00	200.00
Redcar & Cleveland	14.00	37.00	26.00	159.00
Richmond upon Thames	46.00	25.00	67.00	120.00
Rochdale	25.00	30.00	120.00	376.00
Rotherham	650.00	800.00	70.00	272.00
Rutland	3.00	5.00	-	40.00
Salford	60.00	100.00	40.00	216.00
Sandwell	63.00	101.00	76.00	263.00
Sefton	251.00	258.00	197.00	323.00
Sheffield	127.00	177.00	235.00	470.00

Shropshire	77.00	100.00	365.00	400.00
Slough	25.00	35.00	353.00	391.00
Solihull	52.00	48.00	52.00	126.00
Somerset	52.00	88.00	84.00	253.00
South Gloucestershire	25.00	66.00	77.00	113.00
South Tyneside	20.00	252.00	83.00	148.00
Southampton	95.00	158.00	32.00	52.00
Southend-on-Sea	30.00	56.00	54.00	191.00
Southwark	232.00	406.00	560.00	915.00
St Helens	316.00	357.00	482.00	556.00
Staffordshire	131.00	221.00	307.00	518.00
Stockport	52.00	70.00	111.00	190.00
Stockton-on-Tees	6.00	6.00	23.00	146.00
Stoke-on-Trent	34.00	390.00	85.00	197.00
Suffolk	59.00	294.00	11.00	759.00
Sunderland	538.00	468.00	1,728.00	1,851.00
Surrey	47.00	92.00	422.00	830.00
Sutton	52.00	92.00	112.00	248.00
Swindon	26.00	20.00	51.00	185.00
Tameside	704.00	833.00	115.00	340.00
Telford & the Wrekin	30.00	58.00	181.00	353.00
Thurrock	399.00	411.00	78.00	138.00
Torbay	30.00	33.00	88.00	161.00
Tower Hamlets	84.00	115.00	624.00	915.00
Trafford	-	-	213.00	296.00
Wakefield	57.00	40.00	230.00	446.00
Walsall	485.00	499.00	349.00	570.00
Waltham Forest	60.00	150.00	51.00	130.00
Wandsworth	76.00	143.00	568.00	735.00
Warrington	-	-	56.00	115.00
Warwickshire	56.00	100.00	4.00	666.00
West Berkshire	6.00	79.00	12.00	79.00
West Sussex	200.00	300.00	200.00	300.00
Westminster	26.00	85.00	26.00	310.00
Wigan	87.00	76.00	90.00	447.00
Wiltshire	122.00	290.00	76.00	-
Windsor & Maidenhead	50.00	10.00	18.00	101.00
Wirral	100.00	164.00	121.00	294.00
Wokingham	1.00	3.00	4.00	145.00
Wolverhampton	52.00	238.00	33.00	157.00
Worcestershire	83.00	148.00	23.00	560.00
York	23.00	45.00	29.00	106.00
Total	£17,900.00	£26,666.00	£29,949.00	£57,574.00
	217,300.00	~~0,000.00	223,343.00	237,374.00

We help to improve services and achieve better outcomes for children and families, adults and older people including those with mental health problems, physical or people in the criminal justice system. We work with and are funded by Department of Health

August 2007